

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000003213

Entity Name: ALLIANCE FRANCOPHONE CVE, INC.

Current Principal Place of Business:

1080 CAMBRIDGE D
DEERFIELD BEACH,, FL 33442

Current Mailing Address:

1080 CAMBRIDGE D
DEERFIELD BEACH,, FL 33442

FEI Number: 30-0943032

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEBLANC, PAULINE
1080 CAMBRIDGE D
DEERFIELD BEACH, FL 33442 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LAPOINTE, VITAL
Address 2140 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

Title VP
Name MARTEL, RENE
Address 221 ELLESMERE E
City-State-Zip: DEERFIELD BEACH FL 33442

Title SECRETARY
Name BLAIS, MARIE-FRANCE
Address 236 MARKHAM K
City-State-Zip: DEERFIELD BEACH FL 33442

Title TREASURER
Name LEBLANC, PAULINE
Address 1080 CAMBRIDGE D
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name DESJARDINS, DENIS
Address 97 PRESCOTT J
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name RAYMOND, PHIL
Address 200 LYNSHURST M
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name BOURQUE, PAUL
Address 3032 HARWOOD
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name SANTOIRE, LOUISE
Address 4126 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAULINE LEBLANC

TREASURER

01/29/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SOULIERES, DENISE
Address 53 TILFORD
City-State-Zip: DEERFIELD BEACH FL 33442