## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N2000002253

Entity Name: THE HAITI REPOSITORY INC.

#### Current Principal Place of Business:

11826 OLDEGROVE PL TEMPLE TERRACE, FL 33617

## **Current Mailing Address:**

11826 OLDEGROVE PL TEMPLE TERRACE, FL 33617 US

# FEI Number: 85-0615416

#### Name and Address of Current Registered Agent:

BOISETTE, SERGE A 1037 SW 147TH STREET PEMBROKE PINES, FL 33027 US FILED Mar 12, 2024 Secretary of State 9880216612CC

Date

Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

	Title	MGR	Title	MGR
	Name	SCHWARTZ, TIMOTHY T	Name	GRANDVAUX, STEPHANE
	Address	11826 OLEGROOVE PL	Address	FLAT E, REED COURT 9 WATERWAY AVENUE
	City-State-Zip:	TEMPLE TERRACE FL 33617	City-State-Zip:	LONDON SE13 7GB
	Title	AMBR	Title	AMBR
	Name	DELORME, PATRICK	Name	DELORME-PIERRE, JOSETTE
	Address	97 MEADOWCROFT CRESCENT	Address	97 MEADOWCROFT CRESCENT
	City-State-Zip:	OTAWA K1J1H-1 US	City-State-Zip:	OTAWA K1J1H
	Title	AMBR	Title	AMBR
	Name	STANTON PAULE, KATE	Name	NELANGE, ST CYR
	Address	135 STONEHOUSE ROAD	Address	4B THOMASSIN 48
	City-State-Zip:	GLENRIDGE NJ 07028	City-State-Zip:	PETION-VILLE WEST HT6141

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: TIMOTHY T SCHWARTZ

DIRECTOR

03/12/2024

Electronic Signature of Signing Officer/Director Detail