

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002243

FILED
Apr 23, 2008
Secretary of State

Entity Name: BURNETT INTERNATIONAL UNIVERSITY, INC.

Current Principal Place of Business:

13 BOULEVARD 15 OCTOBRE
BELVIL TABARRE HAITI, WI W.I. OC

New Principal Place of Business:

412 # ROUTE DE DELMAS # 412
DELMAS, HAITI, WI W.I. OC

Current Mailing Address:

7462 SALLY LYN LN
LAKE WORTH, FL 33467

New Mailing Address:

6388 SQUIREWOOD WAY
LAKE WORTH, FL 33467

FEI Number: 98-0434817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOISE, FR BURNET REV
7462 SALLY LYN LN
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

MOISE, FR BURNET REV
6388 SQUIREWOOD WAY
LAKE WORTH, FL 33467 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:

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCP () Delete
Name: MOISE, FR BURNET REV
Address: 7462 SALLY LYN LN
City-St-Zip: LAKE WORTH, FL 33467

Title: DVCV () Delete
Name: ST LOUIS, CARLINE MD
Address: 7462 SALLY LYN LN
City-St-Zip: LAKE WORTH, FL 33467

Title: S () Delete
Name: RICHARDSON, YOLEX
Address: 4471 NW 106TH AVE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP (X) Change () Addition
Name: MOISE, FR BURNET REV
Address: 6388 SQUIREWOOD WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: DVCV (X) Change () Addition
Name: ST LOUIS, CARLINE MD
Address: 6388 SQUIREWOOD WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THE REV. FR. BURNET MOISE

DCP

04/23/2008

Electronic Signature of Signing Officer or Director

Date