

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000020

FILED  
Mar 01, 2010  
Secretary of State

**Entity Name:** HAITIAN-AMERICAN COALITION FOR COMMUNITY EMPOWERMENT, INC.

**Current Principal Place of Business:**

4462 GULFVIEW BLVD.  
FT.MYERS, FL 33971

**New Principal Place of Business:**

**Current Mailing Address:**

4462 GULFVIEW BLVD.  
FT.MYERS, FL 33971

**New Mailing Address:**

**FEI Number:** 11-3229955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

INNOCENT, MARIE ELSIE PRES  
4462 GULFVIEW BLVD.  
LEIGH ACRES, FL 33971 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** INNOCENT, MARIE ELSIE PRES  
**Address:** 4462 GULFVIEW BLVD.  
**City-St-Zip:** LEIGH ACRES, FL 33971

**Title:** COUN  
**Name:** INNOCENT, JOSUE  
**Address:** 4462 GULFVIEW BLVD.  
**City-St-Zip:** LEIGH ACRES, FL 33971

**Title:** E.C  
**Name:** PEREZ, BOBBY E.C.  
**Address:** PO BOX 2006  
**City-St-Zip:** FT.MYERS, FL 33902

**Title:** VP  
**Name:** CHERY, MAURISSAINT I VP  
**Address:** 133 JASMINE CIRCLE  
**City-St-Zip:** NAPLES, FL 34112

**Title:** T  
**Name:** GUERRA, MAXIMO R  
**Address:** 4125 E. TAMiami TRAIL  
**City-St-Zip:** NAPLES, FL 34112

**Title:** AEC  
**Name:** WILLIAMS, BENNET A.E.C.  
**Address:** 102 NORTH COLIN AVE  
**City-St-Zip:** LEIGH ACRES, FL 33971

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:** MARIE ELSIE INNOCENT

PRES

03/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date