

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002572

FILED  
May 03, 2010  
Secretary of State

**Entity Name:** INTERFAITH HUMANITARIAN SERVICES, INC.

**Current Principal Place of Business:**

2300 SOB  
13  
ORLANDO, FL 32805

**New Principal Place of Business:**

1310 WEST COLONIAL DR  
13  
ORLANDO, FL 32804

**Current Mailing Address:**

2300 SOB  
13  
ORLANDO, FL 32805

**New Mailing Address:**

1310 WEST COLONIAL DR  
13  
ORLANDO, FL 32804

**FEI Number:** 59-3709634      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GERVAIS, THERESE  
4101 PINE HILLS CIR  
ORLANDO, FL 32808      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: P  
Name: GERVAIS, THERESE  
Address: 4101 PINE HILLS CIR  
City-St-Zip: ORLANDO, FL 32808

Title: VP  
Name: MATHURIN, DOMINIQUE  
Address: 7224 COUNTRY RUN PKWAY  
City-St-Zip: ORLANDO, FL 32818

Title: T  
Name: GERVAIS, ANTONY  
Address: 4101 PINE HILL CIR  
City-St-Zip: ORLANDO, FL 32808

Title: S  
Name: EXCELLENT, LUNA  
Address: 6489 REDWOOD OAKS DR.  
City-St-Zip: ORLANDO, FL 32818

Title: M  
Name: GERVAIS, JUDITH  
Address: 2942 HICKORY CREEK DR  
City-St-Zip: ORLANDO, FL 32818

Title: MA  
Name: SALOMON, JOACHIM J  
Address: 7458 RADIANT CIR  
City-St-Zip: ORLANDO, FL 32810

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: THERESE GERVAIS

PRES

05/03/2010

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

\_\_\_\_\_  
Date