

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90064 031 ***61.25

DOCUMENT # N02000008291

1. Entity Name
FIRST HAITIAN COMMUNITY CENTER OF CENTRAL
FLORIDA INCORPORATED



Principal Place of Business
1259 N PINE HILLS RD
ORLANDO, FL 32808

Mailing Address
1259 N PINE HILLS RD
ORLANDO, FL 32808

40099044



2. Principal Place of Business - No P.O. Box #

114 N. Orange Blossom Trail

3. Mailing Address

114 N. Orange Blossom Trail

04222007

Chg-NP

CR2E037 (12/06)

City & State

Orlando FL

City & State

Orlando FL

4. FEI Number

41-2079012

Applied For

Not Applicable

Zip

32805

Country

Orange

Zip

32805

Country

Orange

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BELABRE, JEAN-ROBERT
10668 FAIRHAVEN WAY
ORLANDO, FL 32825

7. Name and Address of New Registered Agent

Name Belabre Jean Robert

Street Address (P.O. Box Number is Not Acceptable)

14247 Sapphire Bay Circle

City Orlando

FL

Zip Code 32828

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P. BELABRE, JEAN-ROBERT ☒ Delete
NAME
STREET ADDRESS 10668 FAIRHAVEN WAY
CITY-ST-ZIP ORLANDO, FL 32825

TITLE VP ☐ Delete
NAME FRANCOIS, MARIE JOSE
STREET ADDRESS 114 N OBT
CITY-ST-ZIP ORLANDO, FL 32805

TITLE T ☐ Delete
NAME VERRET, ROGER
STREET ADDRESS 114 N OBT
CITY-ST-ZIP ORLANDO, FL 32805

TITLE T ☐ Delete
NAME DORCEAN, MICHEL
STREET ADDRESS 114 N OBT
CITY-ST-ZIP ORLANDO, FL 32805

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Belabre Jean Robert ☒ Change ☐ Addition
NAME
STREET ADDRESS 14247 Sapphire Bay Circle
CITY-ST-ZIP Orlando FL 32828

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11; if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/07

Date

407 497 3667

Daytime Phone #