

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008291

FILED
Apr 29, 2008
Secretary of State

Entity Name: FIRST HAITIAN COMMUNITY CENTER OF CENTRAL FLORIDA INCORPORATED

Current Principal Place of Business:

114 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

114 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

New Mailing Address:

14247 SAPPHIRE BAY CIRCLE
ORLANDO, FL 32828

FEI Number: 41-2079012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELABRE, JEAN- ROBERT
14247 SAPPHIRE BAY CIRCLE
ORLANDO, FL 32828 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 () Delete
Name: BELABRE, JEAN-ROBERT
Address: 14247 SAPPHIRE BAY CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: VP () Delete
Name: FRANCOIS, MARIE JOSE
Address: 114 N OBT
City-St-Zip: ORLANDO, FL 32805

Title: T () Delete
Name: VERRET, ROGER
Address: 114 N OBT
City-St-Zip: ORLANDO, FL 32805

Title: T () Delete
Name: DORCEAN, MICHEL
Address: 114 N OBT
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN ROBERT BELABRE

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date