2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2008
Secretary of State

DOCUMENT# N03000001352

Entity Name: HAITIAN SOLIDARITY FOR THE DEVELOPMENT OF FONDS-PARISIEN, INC

Current Principal Place of Business:

4869 JEFFERSON ROAD
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 7895
DELRAY BEACH, FL 33482

New Mailing Address:

FEI Number: 43-1997255 **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:

PIERRE, CLERVEAUX A
11211 SOUTH MILITARY TR.
APT. # 4921
BOYNTON BEACH,,, FL 33436 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:	CELIN, JEAN D REV	
Address:	4869 JEFFERSON ROAD	
City-St-Zip:	DELRAY BEACH, FL 33445	
Title:	VP	( ) Delete
Name:	JEAN BAPTISTE, ALBERIC A MR.	
Address:	1101 PRISTOL RD	
City-St-Zip:	MOUNTAINSIDE, NJ 07092	
Title:	SEC	( ) Delete
Name:	FLERIUS, JEAN S MR.	
Address:	11320 AVENNUE PIGEON	
City-St-Zip:	MONTREAL, QB HIG5V7	
Title:	V-SE	( ) Delete
Name:	POLYNICE, GERGENS MR	
Address:	2028 FALLING BROOK	
City-St-Zip:	MARYLAND HEIGHT, MO 63043	
Title:	TR	( ) Delete
Name:	ARITUS, JEAN L MR	
Address:	999 CAVER RD SE	
City-St-Zip:	PALM BAY, FL 32909	
Title:	CONS	( ) Delete
Name:	AUGUSTE, WILNO MR	
Address:	2150 NE 168TH SRREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162	

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:	
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: REV. JEAN D. CELIN PRES 07/12/2008

Electronic Signature of Signing Officer or Director — Date