

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90401 001 ****61.25

DOCUMENT # N04000003890 1. Entity Name HAITIAN CHILDREN RELIEF FUND INC.					
Principal Place of Business 9804 MAJORCA PLACE BOCA RATON, FL 33434 (delete)			Mailing Address 9858 GLADES RD #217 BOCA RATON, FL 33434 (delete)		
2. Principal Place of Business 3808 Arelia Dr. N Suite, Apt. #, etc.		3. Mailing Address 3808 Arelia Dr. N Suite, Apt. #, etc.			
City & State Delray Beach Fl 33445		City & State Delray Beach Fl 33445		4. FEI Number 20-1307288	
Zip 33445		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RICHARDSON, KARLIE 1770 BANYAN CREEK CIRCLE N. BOYNTON BEACH, FL 33436				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent, signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VIP GEFFRARD, YVES REV. 22094 LYONS ROAD BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CASSAGNOL, MAUD 9804 MAJORCA PLACE BOCA RATON, FL 33434		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Maud Cassagnol 3808 Arelia Drive N Delray Beach Fl 33445 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LARRIERUX, GESSY 23237 SW 61ST AVE. BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PR JOSEPH, JUDITH 18352 CORAL ISLES DRIVE MOCA RATON, FL 33498		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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: <i>Jessie Larrieux</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/26/06 561-852-6918 Date Daytime Phone #		

JESSIE LARRIERUX