

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001218

FILED
Apr 04, 2006
Secretary of State

Entity Name: HAITIAN SOCIAL DEVELOPMENTAL SERVICES, INC.

Current Principal Place of Business:

800 MIMOSA DRIVE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

800 MIMOSA DRIVE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SEJOUR, JOSEPH
800 MIMOSA DRIVE
ALTAMONTE SPRINGS, FL 32714 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: SEJOUR, JOSEPH
Address: 800 MIMOSA DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S () Delete
Name: ST. PREUX, CECILLE
Address: 5885 SIR HENRY WARD STREET
City-St-Zip: ORLANDO, FL 32808

Title: TD () Delete
Name: VALENTIN, SADRAK
Address: 7642 FOREST CIYY ROAD
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: ST. PREUX, CECILLE
Address: 5885 SIR HENRY ROAD
City-St-Zip: ORLANDO, FL 32808

Title: S (X) Change () Addition
Name: VALENTIN, SADRAK
Address: 7642 FOREST CIYY ROAD
City-St-Zip: ORLANDO, FL 32810

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH R. SÉJOUR

P

04/04/2006

Electronic Signature of Signing Officer or Director

_____ Date