## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001673

FILED May 18, 2012 Secretary of State

Entity Name: ASSOCIATION OF HAITIAN SOCIAL WORKERS, INC.

Current Principal Place of Business: New Principal Place of Business:

8325 NE 2ND AVE MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

PO BOX 551962 8325 NE 2ND AVE MIAMI GRADENS, FL 33055 MIAMI, FL 33138

FEI Number: 20-2807146 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWN, ANNEZE 4798 NW 6TH CT

DELRAY BEACH, FL 33445 US

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: F

 Name:
 BROWN, ANNEZE

 Address:
 4798 NW 6TH COURT

 City-St-Zip:
 DELRAY BEACH, FL 33445

Title: VP

 Name:
 HOMY, MYRLENE

 Address:
 21001 NW 14TH PL., #245

 City-St-Zip:
 MIAMI GARDENS, FL 33169

Title: T

Name: SAINT-FORT, MARIE-LOURDES Address: 1479 NE 180TH STREET City-St-Zip: MIAMI, FL 33169

Title: C

Name: DESRAMEAUX, RODNEY Address: PO BOX 551962

Address: PO BOX 551962 City-St-Zip: MIAMI, FL 33055

Title: VC

Name: JEAN, GIORDANY Address: 8325 NE 2ND AVE City-St-Zip: MIAMI, FL 33138

Title:

 Name:
 ALEXIS, MARIE

 Address:
 10701 NW 2ND COURT

 City-St-Zip:
 MIAMI, FL 33168

I hereby 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 all other like empowered.

SIGNATURE: ABROWN P 05/18/2012