

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005498

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** GESNER LAMOTHE COMMUNITY ORGANIZATION, INC.

**Current Principal Place of Business:**

190 N.E. 21ST STREET  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

190 N.E. 21ST STREET  
BOCA RATON, FL 33431

**New Mailing Address:**

**FEI Number:** 75-3193104

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LAMOTHE, EDWIDGE  
190 N.E. 21ST STREET  
BOCA RATON, FL 33431 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: D ( ) Delete  
Name: LAMOTHE, EDWIDGE  
Address: 190 N.E. 21ST STREET  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: EMILCAR, JUDE V  
Address: 5288 N.W. 5TH COURT  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Delete  
Name: CEMOIN, JEAN G  
Address: 22546 S.W. 7TH STREET  
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete  
Name: DORSAINVIL, THONY  
Address: 1860 N.W. 42ND TERRACE APT. D-201  
City-St-Zip: LAUDERHILL, FL 33313

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: SAINT-LOUIS, MONA  
Address: 1633 NE 158 STREET  
City-St-Zip: MIAMI, FL 33162

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

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

Title: D ( ) Change (X) Addition  
Name: GUERRIER, GEORGES H  
Address: 19600 NW 6PL  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D ( ) Change (X) Addition  
Name: THELUSMA, BERTHONY  
Address: 1240 NE 161 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: EDWIDGE LAMOTHE

D

04/25/2006

Electronic Signature of Signing Officer or Director

Date