2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2008
Secretary of State

DOCUMENT# N05000010492

Entity Name: HAITISBABIES.ORG, INC.

Current Principal Place of Business:

966 18TH PLACE SW
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

PO BOX 151
VERO BEACH, FL 329610151

New Mailing Address:

FEI Number: 20-3645307 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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: DPT ( ) Delete
Name: PLOURDE, BEVERLY
Address: 1450 16TH COURT SW
City-St-Zip: VERO BEACH, FL 32962

Title: DS ( ) Delete
Name: PLOURDE, CHRISTOPHER
Address: 1450 16TH CT SW
City-St-Zip: VERO BEACH, FL 32962

Title: DV ( ) Delete
Name: GREENSTEIN, GLENN
Address: 118 STONY POINT DR
City-St-Zip: SEBASTIAN, FL 32958

Title: DV ( ) Delete
Name: ATKINS-BAIRD, REBECCA
Address: 966 18TH PLACE SW
City-St-Zip: VERO BEACH, FL 32962

Title: DV (X) Delete
Name: BAIRD, JAMES P
Address: 966 18TH PLACE SW
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change ( ) Addition
Name: PLOURDE, CHRISTOPHER M
Address: 1450 16TH CT SW
City-St-Zip: VERO BEACH, FL 32962

Title: DV (X) Change ( ) Addition
Name: BAIRD, JAMES P
Address: 966 18TH PLACE SW
City-St-Zip: VERO BEACH, FL 32962

Title: DV (X) Change ( ) Addition
Name: BAIRD, REBECCA
Address: 966 18TH PLACE SW
City-St-Zip: VERO BEACH, FL 32962

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: CHRISTOPHER M. PLOURDE DS 01/05/2008

Electronic Signature of Signing Officer or Director — Date