2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2012
Secretary of State

DOCUMENT# N05000012727

Entity Name: HAITIAN MINISTERIAL ASSOCIATION OF THE TREASURE COAST, INC.

Current Principal Place of Business:

604 PARKWAY AVE
FORT PIERCE, FL 34950

New Principal Place of Business:

735 ORANGE AVE
FORT PIERCE, FL 34950

Current Mailing Address:

604 PARKWAY AVE
FORT PIERCE, FL 34950

New Mailing Address:

735 ORANGE AVE
FORT PIERCE, FL 34950

FEI Number: 56-2563927 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERMIS, PASCAL
15248 S.W. MYRTLE DR.
INDIANTOWN, FL 34956 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/D
Name: THOMAS, ETZER
Address: 107 EMPIRE TERRACE
City-St-Zip: SEBASTIAN,, FL 32958

Title: D
Name: LORIUS, DESSOURCES
Address: 1207 TEXAS COURT
City-St-Zip: FT. PIERCE, FL 34950

Title: D
Name: BRENOVIL, LEBER
Address: 481 STARFLOWER AVE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: D
Name: JUSTIN, FLOREAL
Address: 2272 S.E. MASLAN AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D
Name: GUERRIER, FRITZ M.
Address: 2701 RHODE ISLAND AVE.
City-St-Zip: FT. PIERCE, FL 34947

Title: D
Name: TATTEGRAIN, RAYMOND
Address: P.O.BOX 124
City-St-Zip: FORT PIERCE, FL 34954

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: ETZER THOMAS P/D 03/12/2012

Electronic Signature of Signing Officer or Director — Date