

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000039

FILED
Apr 30, 2007
Secretary of State

Entity Name: GLOBAL HAITIAN COOPERATION FOR HAITI COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:

5244 LABRADOR LANE
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

5244 LABRADOR LANE
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 02-0764750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUFFRENA, CHRISTOME
4707 LANGDALE DRIVE
ORLANDO, FL 32808 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: SUFFRENA, CHRISTOME
Address: 4707 LANGDALE DRIVE
City-St-Zip: ORLANDO, FL 32808 US

Title: VP () Delete
Name: PAUL, ALCIDE
Address: 5244 LABRADOR LANE
City-St-Zip: ORLANDO, FL 32818 US

Title: S () Delete
Name: LALANE, VEDETTE
Address: 218 HICKORY COVE CT.
City-St-Zip: ORLANDO, FL 32118

Title: D () Delete
Name: ALEXANDRE, ANTOINE
Address: 2209 WOODWIND DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: JEAN BAPTISTE, RONALD
Address: 2909 N. PINE HILLS RD.
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: DESAMOUR, JUNIAS
Address: 113 ALEXANDRIA PL
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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City-St-Zip:

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

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: SUFFRENA CHRISTOME

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date