## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000001578

FILED Nov 21, 2007 Secretary of State

Entity Name: RESECTABLE LODGE PARFAITE HARMONIE INC

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

11761 SOUTH ORANGE BLOSSOM TRAIL 1308 G ROSE BOULEVARD

SUITE B SUITE G

ORLANDO, FL 32837 ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

12720 S ORANGE BLOSSOM TRAIL 1308 G BOULEVARD

ORLANDO, FL 32837 SUITE G

ORLANDO, FL 32839

FEI Number: 41-2207695 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HECTOR, THEVENOT CELESTE, ARNOLD 12720 S ORANGE BLOSSOM TRAIL 1555 ROYAL CR

ORLANDO, FL 32837 US APOPKA, FL 32703 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: ARNOLD CELESTE 11/21/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: P ( ) Delete Title: P (X) Change ( ) Addition

Name: HECTOR, THEVENOT Name: JEAN, FRITZ
Address: 36 ALTERA CT. Address: 2640 CORBYTON CT

Address: 36 ALTERA CT. Address: 2640 CORBTTON CT City-St-Zip: KISSIMMEE, FL 34758 City-St-Zip: ORLANDO, FL 32828

Title: S () Delete Title: S (X) Change () Addition Name: ESPIERRE, JOSEPH Name: SMITH, PIERRE

Address: 943 S.KIRKLAND RD., #154 Address: 1406 W. HOLDEN AVE APT C

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32839

 Name:
 CELESTE, ARNOLD
 Name:
 JEAN, WILFRID

 Address:
 1555 ROYAL CIRCLE
 Address:
 6401 MERRIEWOOD DR

 City-St-Zip:
 APOPKA, FL 32703
 City-St-Zip:
 ORLANDO, FL 32818

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: FRITZ JEAN P 11/21/2007