

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008543

FILED
Sep 07, 2007
Secretary of State

Entity Name: ASSOCIATION POUR DEVELOPPER L'ASILE INC.

Current Principal Place of Business:

3511 LEPRE CHAUN WAY
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

3511 LEPRE CHAUN WAY
ORLANDO, FL 32808

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
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:

VILSAINT, KESNEL
3511 LEPRE CHAUN WAY
ORLANDO, FL 32808 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VILSAINT, KESNEL
Address: 3511 LEPRE CHAUN WAY
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: CELIDOR, DUCCO
Address: 4850 CARTER ST
City-St-Zip: ORLANDO, FL 32811

Title: T () Delete
Name: MORAND, RONALD
Address: 985 KIRKMAN RD APT #1
City-St-Zip: ORLANDO, FL 32811

Title: T () Delete
Name: MORAND, ALDERD
Address: 10602 RAMBLE WOOD RD
City-St-Zip: ORLANDO, FL 32837

Title: S () Delete
Name: KETTANT, PATRICK
Address: 2701 SHERINGHAM RD
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: MALIVERT, ALAIN
Address: 4431 CARTER ST
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MICHEL, FRANCK
Address: 12966 MOSS PARK RIDGE DR.
City-St-Zip: ORLANDO, FL 32832

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

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

Title: S (X) Change () Addition
Name: KETTANT, PATRICK
Address: 5503 HIDE PARK AV.
City-St-Zip: ORLANDO, FL 32808

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: VILSAINT KESNEL

D

09/07/2007

Electronic Signature of Signing Officer or Director

Date