

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001275

FILED
Mar 10, 2010
Secretary of State

Entity Name: HAITIAN FAMILY EMERGENCY CHARITY AND FUNDS, INC.

Current Principal Place of Business:

1860 OLD OKEECHOBEE RD SUITE 511
WEST PALM BEACH, FL 33409

New Principal Place of Business:

2475 MERCER AVE
104
WEST PALM BEACH, FL 33401

Current Mailing Address:

1860 OLD OKEECHOBEE RD SUITE 511
WEST PALM BEACH, FL 33409

New Mailing Address:

2475 MERCER AVE
104
WEST PALM BEACH, FL 33401

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

Name and Address of Current Registered Agent:

LEGER, JAMES
1860 OLD OKEECHOBEE RD SUITE 511
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

LEGER, JAMES
1702 17TH WAY
WEST PALM BEACH, FL 33409 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: JAMESLEGER

03/10/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: LEGER, JAMES
Address: 1860 OLD OKEECHOBEE RD SUITE 511
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D
Name: AMBOISE, JEFTHÉ
Address: 745 MALIBU BAY DRIVE APT 106
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D
Name: CLERGE, CARLINE
Address: 200 BUTLER ST SUITE 311
City-St-Zip: WEST PALM BEACH, FL 33409

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: JAMESLEGER

P

03/10/2010

Electronic Signature of Signing Officer or Director

Date