

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003703

FILED  
May 03, 2011  
Secretary of State

**Entity Name:** L'ORGANISATION DES ANCIENS DU COLLEGE IMMACULEE CONCEPTION, INC.

**Current Principal Place of Business:**

12900 NW 15TH AVE  
NORTH MIAMI, FL 33167 US

**New Principal Place of Business:**

**Current Mailing Address:**

12900 NW 15TH AVE  
NORTH MIAMI, FL 33167 US

**New Mailing Address:**

P.O BOX 530371  
MIAMI, FL 33153 US

**FEI Number:** 13-4359034

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DODARD, PATRICK  
495 NE 144TH STREET  
NORTH MIAMI, FL 33161 US

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

ROMAIN, MIGUEL VP  
4821 SW 21ST STREET  
WEST PARK, FL 33023 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: MIGUEL ROMAIN

05/03/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALDWINE, JOSEPH P  
Address: 12900 NW 15TH AVE  
City-St-Zip: NORTH MIAMI, FL 33167 US

Title: VP  
Name: ROMAIN, MIGUEL VP  
Address: 4821 SW 21ST STREET  
City-St-Zip: WEST PARK, FL 33023 US

Title: PR  
Name: WISLET, JACQUESIN PR  
Address: 1109 E STREET  
City-St-Zip: WEST PALM BEACH, FL 33162 US

Title: T  
Name: RICHARD, RIVELINO  
Address: 14040 NE 3RD COURT # 2  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: S  
Name: HYACINTHE, NEPHTALIE  
Address: 220 SW 9 AVE # 421  
City-St-Zip: HALLANDALE BCH, FL 33009

Title: TA  
Name: JEAN-BAPTISTE, VANESSA  
Address: 1205 N.E 138TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

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: MIGUEL ROMAIN

VP

05/03/2011

Electronic Signature of Signing Officer or Director

Date