

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008015

FILED
Jan 07, 2009
Secretary of State

Entity Name: CLINIQUE MOBILE EDUCATION RURALE, INC

Current Principal Place of Business:

800 MIMOSA DR
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

800 MIMOSA DR
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 42-1737950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEJOUR, JOSEPH R
800 MIMOSA DR
ALTAMONTE SPRINGS, FL 32714 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: SEJOUR, JOSEPH R
Address: 800 MIMOSA DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S () Delete
Name: ST. PREUX, CECILE
Address: 5885 SIR HENRY DR
City-St-Zip: ORLANDO, FL 32808

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: HENRIOT, BRUMAIRE
Address: JONQUIL DR
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: JOSEPH R. SEJOUR

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date