

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012299

FILED  
Jul 30, 2008  
Secretary of State

Entity Name: RADIO OCCIDENTALE, INC.

**Current Principal Place of Business:**

2250 FOWLER STREET  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

2250 FOWLER STREET  
FORT MYERS, FL 33901

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

ST PIERRE, MIREILLE  
2250 FOWLER STREET  
FORT MYERS, FL 33901 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: P ( ) Delete  
Name: TONDREAU, LUCIE  
Address: 9822 NE 2 AVE  
City-St-Zip: MIAMI SHORES, FL 33138

Title: ST ( ) Delete  
Name: ST PIERRE, MIREILLE  
Address: 2250 FOWLER STREET  
City-St-Zip: FORT MYERS, FL 33901

Title: V ( ) Delete  
Name: CALIXTE, ROMERE  
Address: 2250 FOWLER STREET  
City-St-Zip: FORT MYERS, FL 33901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: MIREILLE ST-PIERRE

ST

07/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date