

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000963

FILED
Apr 28, 2009
Secretary of State

Entity Name: CALVARY HAITI MISSION SUPPORT CO

Current Principal Place of Business:

1836 FARILIGHT STREET NW
PALM BAY, FL 32907

New Principal Place of Business:

Current Mailing Address:

P O BOX 111331
PALM BAY, FL 32911

New Mailing Address:

FEI Number: 26-1784958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POTEAU, SEIGE R
1836 FAIRLIGHT STREET NW
PALM BAY, FL 32907 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: POTEAU, SEIGE R
Address: 1836 FAIRLIGHT STREET NW
City-St-Zip: PALM BAY, FL 32907

Title: VP () Delete
Name: GEHY, RAFAEL E
Address: 12650 SW 54 CT
City-St-Zip: MIRAMAR, FL 33027

Title: DIR () Delete
Name: BOUQUET, LEONEL
Address: 1673 NW HAWSBILL STREET NW
City-St-Zip: PALM BAY, FL 32907

Title: DIR () Delete
Name: KEHAYIAS, CHRIS
Address: 2720 BRADFORDT DR
City-St-Zip: W MELBOURNE, FL 32904

Title: DIR () Delete
Name: BUCHMAN, BILL
Address: 2601 OKLAHOMA ST
City-St-Zip: MELBOURNE, FL 32904

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:

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: SEIGE R POTEAU

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date