

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001788

FILED  
Feb 13, 2009  
Secretary of State

Entity Name: FOUNDATION MARTIN LUTHER JULES, INC.

**Current Principal Place of Business:**

207 GALE PLACE  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

207 GALE PLACE  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

FEI Number: 26-2104439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE STE 4  
WESTON, FL 33331 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: D ( ) Delete  
Name: DUPERVIL, ERLIE S  
Address: 207 GALE PLACE  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D ( ) Delete  
Name: LOUISAIRE, JAMES  
Address: 10 WALDEN SQUARE ROAD  
City-St-Zip: CAMBRIDGE, MA 02140

Title: D ( ) Delete  
Name: SULFA, MARIE N  
Address: 104 OAK LANE APT 5  
City-St-Zip: BROCKTON, MA 02301

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: DUPERVIL, ERLIE S P  
Address: 207 GALE PLACE  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D (X) Change ( ) Addition  
Name: LOUISAIRE, JAMES T  
Address: 10 WALDEN SQUARE ROAD  
City-St-Zip: CAMBRIDGE, MA 02140

Title: D (X) Change ( ) Addition  
Name: SULFA, MARIE N S  
Address: 104 OAK LANE APT 5  
City-St-Zip: BROCKTON, MA 02301

Title: D ( ) Change (X) Addition  
Name: JULES, LUTHER M C  
Address: #4, 1ST IMPASSE ROGER COLAS  
City-St-Zip: ROUTE DE FRERES, PV 6110 HT

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: MARTIN LUTHER JULES

C

02/13/2009

Electronic Signature of Signing Officer or Director

Date