

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001788

FILED  
Apr 30, 2011  
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:**

207, GALE PLACE  
WEST PALM BEACH, FL 33409 US

**Current Mailing Address:**

207, GALE PLACE  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

207, GALE PLACE  
WEST PALM BEACH, FL 33409 US

FEI Number: 26-2104439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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  
Name: ACHILLE, VALERIE C PCEO  
Address: 13101, MAHOGANY DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: D  
Name: JULES, MICHAELA S TCFO  
Address: APPARTMENT 1513 CLAIRE LANE  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: D  
Name: ALERTE, BELOU SCOO  
Address: 207, GALE PLACE  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: D  
Name: JULES, MARTIN L C  
Address: #4, 1ST IMPASSE ROGER COLAS  
City-St-Zip: ROUTE DE FRERES, PV 6110 HT

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: MARTIN LUTHER JULES

C

04/30/2011

Electronic Signature of Signing Officer or Director

Date