2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# N08000008612

Entity Name: HAITIAN EMERGENCY RELIEF ORGANIZATION, INC.

Current Principal Place of Business:

5274 GOLDEN GATE PARKWAY
SUITE 2
NAPLES, FL 34116

New Principal Place of Business:

Current Mailing Address:

5274 GOLDEN GATE PARKWAY
SUITE 2
NAPLES, FL 34116

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARCON, DR. GREGOIRE
5274 GOLDEN GATE PARKWAY
SUITE 2
NAPLES, FL 34116 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: GARCON, DR. GREGOIRE
Address: 5274 GOLDEN GATE PARKWAY SUITE 2
City-St-Zip: NAPLES, FL 34116

Title: VP ( ) Delete
Name: VILBON, WILHEM
Address: 242 MONTEREY DR
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GREGOIRE GARCON P 01/09/2009

Electronic Signature of Signing Officer or Director — Date