

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011412

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: HAITIAN LIGHT MINISTRY INC

## Current Principal Place of Business:

1010 N HIAWASSEE RD  
ORLANDO FL, 32818

## New Principal Place of Business:

1010 N HIAWASSEE RD  
N/A  
ORLANDO FLORIDA, FL 32818

## Current Mailing Address:

807 FORESTER AVE  
ORLANDO FLORIDA, 32809

## New Mailing Address:

807 FORESTER AVE  
ORLANDO FLORIDA, FL 32809

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

## Name and Address of Current Registered Agent:

TASSY, GABRIEL  
807 FORESTER AVE  
ORLANDO, FL 32809 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: TASSY, GABRIEL  
Address: 807 FORESTER AVE  
City-St-Zip: ORLANDO FLORIDA, FL 32809

Title: VP ( ) Delete  
Name: MEZILIEN, FRANCOIS  
Address: 5447 SW 32ST  
City-St-Zip: PEMBROKE PARK, FL 33023

Title: VP ( ) Delete  
Name: PIERRE, FRITZ CLERVEAU  
Address: 21 AUSTIN ST  
City-St-Zip: HYDE PARK,, MA 02136

Title: VP ( ) Delete  
Name: BELLAMY, BRENUS  
Address: 10678 ROYAL PALM BLVD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP ( ) Delete  
Name: TASSY, LINDA  
Address: 16 CLINTON AVE  
City-St-Zip: BROOKLYN,, NY 11205

## 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: FR GABRIEL TASSY

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date