## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09000000486

Apr 27, 2012 Secretary of State

Entity Name: AMERICAN MUSEUM OF CREOLE CULTURES FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

**5649 NW 84 TERRACE** 23 CORAL REEF CT. SOUTH, SUITE 110 PALM COAST, FL 32137

TAMARAC, FL 33351

**New Mailing Address: Current Mailing Address:** 

**5649 NW 84 TERRACE** 23 CORAL REEF CT. SOUTH, SUITE 110 PALM COAST, FL 32137 TAMARAC, FL 33351

FEI Number: 26-4056554 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TURNBULL, CLAUDE **5649 NW 84 TERRACE** SUITE 110 TAMARAC, FL 33351 US

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:**

VOYARD, RANDOLPH Name: Address: 3740 INVERRARY D City-St-Zip: LAUDERHILL, FL 33319

Title:

Name: HENAO, CESAR Address: 3740 INVERRARY D City-St-Zip: LAUDERHILL, FL 33319

Title:

COUVEZ, ANNIE Name:

95 BOULEVARD BERTHIER Address:

City-St-Zip: PARIS 75017, OC

Title: MEM

Name: KESLER, DIDIER

95 BOULEVARD BERTHIER Address:

City-St-Zip: PARIS 75017, OC

Title:

VOYARD, ERNEST S Name: 23 CORAL REEF CT. SOUTH, Address: PALM COAST, FL 32137 City-St-Zip:

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: RANDOLPH VOYARD Ρ 04/27/2012