2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006791

FILED Apr 27, 2011 Secretary of State

Entity Name: ALLIANCE DEVELOPMENT EMPOWERMENT FOR FAMILY'S AND CHILDREN, INC.

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

7507 BRISTOL CIRCLE NAPLES, FL 32318 US

Current Mailing Address: New Mailing Address:

7507 BRISTOL CIRCLE NAPLES, FL 32318 US

FEI Number: 27-1544889 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:

ST-AUDE, ERNAUD 7507 BRISTOL CIRCLE NAPLES, FL 32318 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:

Title: CP

Name: ST-AUDE, ERNAUD
Address: 7507 BRISTOL CIRCLE
City-St-Zip: NAPLES, FL 34120 US

Title: DBM

 Name:
 CROWLEY, CHIP

 Address:
 680 WIGGINS LAKE DRIVE

 City-St-Zip:
 NAPLES, FL 34110 US

Title: DVP

Name: SALNAVE EMMANUEL, LAMBERT DR.

Address: 7507 BRISTOL CIRCLE City-St-Zip: NAPLES, FL 34120 US

Title: DBM

Name: CONSTANT, THERESSY Address: 7507 BRISTOL CIRCLE City-St-Zip: NAPLES, FL 34120 US

Title: DBM

Name: FRANCISCO -, JOLIA DELCARME

Address: 7507 BRISTOL CIRCLE City-St-Zip: NAPLES, FL 34120 US

Title: DBM

Name: PETIT FRERE, FERNANDE Address: 7507 BRISTOL CIRCLE City-St-Zip: NAPLES, FL 34120 US

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: ERNAUD ST AUDE CPRS 04/27/2011