

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000488

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** CIVIC LEAGUE OF HAITIAN-AMERICAN VOTERS, INC

**Current Principal Place of Business:**

750 SOUTH ORANGE BLOSSOM TRAIL  
SUITE 148  
ORLANDO, FL 32805 US

**New Principal Place of Business:**

37 N. ORANGE AVE.  
SUITE 500  
ORLANDO, FL 32801 US

**Current Mailing Address:**

750 SOUTH ORANGE BLOSSOM TRAIL  
SUITE 148  
ORLANDO, FL 32805 US

**New Mailing Address:**

2413 COUNTRY POND CT.  
SUITE 500  
ORLANDO, FL 32801 US

**FEI Number:** 27-1793049

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PHILIPPE, WIKINDSON  
2413 COUNTRY POND COURT  
ST. CLOUD, FL 34771 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  
Name: PHILIPPE, WIKINDSON  
Address: 2413 COUNTRY POND CT  
City-St-Zip: ST. CLOUD, FL 34771 US

Title: VP  
Name: PAUL, ALCIDE  
Address: 5244 LABRADOR LANE  
City-St-Zip: ORLANDO, FL 32818 US

Title: M  
Name: NARCISSE, JEAN M JR.  
Address: 1737 DUNN COVE DRIVE  
City-St-Zip: APOPKA, FL 32703 US

Title: VP  
Name: JANVIER, PAUL I  
Address: 3700 CURRY FORD ROAD  
City-St-Zip: ORLANDO, FL 32806 US

Title: M  
Name: ELIDOR, EDENS  
Address: 437 HAMMER STONE AVE  
City-St-Zip: HAINES CITY, FL 33844 US

Title: M  
Name: SHOONOLD, JADIS  
Address: 742 LADY DIANA DRIVE  
City-St-Zip: DAVENPORT, FL 33827 FL

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: WIKINDSON PHILIPPE

P

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date