

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001498

FILED  
Mar 29, 2011  
Secretary of State

**Entity Name:** HAITIAN AMERICAN EMPOWERMENT ORGANIZATION INC.

**Current Principal Place of Business:**

3901 DAVIS BLVD.  
NAPLES, FL 34104

**New Principal Place of Business:**

3901 DAVIS BLVD.  
NAPLES, FL 34104 US

**Current Mailing Address:**

3901 DAVIS BLVD.  
NAPLES, FL 34104

**New Mailing Address:**

3901 DAVIS BLVD.  
NAPLES, FL 34104 US

**FEI Number:** 27-1925512

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GUILLAUME, ALIX  
1100 GOLDEN EAGLE CIR.  
NAPLES, FL 34102 US

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

GUILLAUME, ALIX  
230 KIMBERLAKE, CIRCLE  
UNIT C-203  
NAPLES, FL 34104 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: ALIX GUILLAUME

03/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: MATHEUS, FRANTZ G  
Address: 406 E. 7TH STREET  
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: VP/D  
Name: SAINVILUS, JAMES  
Address: 261 20TH ST. SE  
City-St-Zip: NAPLES, FL 34117 US

Title: CH/D  
Name: GUERRIER, PANEL MARC REV.  
Address: 3901 DAVIS BLVD.  
City-St-Zip: NAPLES, FL 34104 US

Title: TR/D  
Name: PAUL, PHENIX  
Address: 4590 16TH PLACE SW APT. 107  
City-St-Zip: NAPLES, FL 34116 US

Title: S/D  
Name: GUILLAUME, ALIX  
Address: 1100 GOLDEN EAGLE CIR.  
City-St-Zip: NAPLES, FL 34102 US

Title: VC/D  
Name: LUCIEMABLE, ADRIEN  
Address: 4210 SW 14TH AVE.  
City-St-Zip: CAPE CORAL, FL 33914 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: ALIX GUILLAUME

SEC.

03/29/2011

Electronic Signature of Signing Officer or Director

Date