

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000002642

FILED  
May 03, 2011  
Secretary of State

**Entity Name:** ENEE JEAN-PIERRE FOUNDATION, INC.

**Current Principal Place of Business:**

8322 N RIVER HIGHLAND PLACE  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

8322 N RIVER HIGHLAND PLACE  
TAMPA, FL 33617

**New Mailing Address:**

6781 CORAL REEF STREET  
LAKE WORTH, FL 33467

**FEI Number:** 27-2327265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JEAN-PIERRE, MARYSE  
8322 N RIVER HIGHLAND PLACE  
TAMPA, FL 33617 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: PV  
Name: JEAN-PIERRE, MARYSE  
Address: 8322 N RIVER HIGHLAND PLACE  
City-St-Zip: TAMPA, FL 33617

Title: STD  
Name: JEAN-PIERRE, MARLYNE  
Address: 8322 N RIVER HIGHLAND PLACE  
City-St-Zip: TAMPA, FL 33617

Title: D  
Name: ADELSON, RAPHAEL  
Address: 8322 N RIVER HIGHLAND PLACE  
City-St-Zip: TAMPA, FL 33617

Title: D  
Name: FRANCOIS, EDMEE  
Address: 8322 N RIVER HIGHLAND PLACE  
City-St-Zip: TAMPA, FL 33617

Title: D  
Name: JEAN, WILKING  
Address: 8322 N RIVER HIGHLAND PLACE  
City-St-Zip: TAMPA, FL 33617

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: MARYSE JEAN-PIERRE

PV

05/03/2011

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

\_\_\_\_\_  
Date