

N10000002831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200171219872

03/08/10--01074--008 \*\*87.50

FILED  
10 MAR 18 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W1 0000012138

CR

3-19-10 CR

## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: THE HAITIAN RELIEF OF CENTRAL FLORIDA FOUNDATION  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: RONY LOUIS  
Name (Printed or typed)

5927 ANNO AVE  
Address

ORLANDO, FLORIDA, 32809  
City, State & Zip

407 690 6918  
Daytime Telephone number

RONYLOUIS2000@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 10, 2010

RONY LOUIS  
5927 ANNO AVE.  
ORLANDO, FL 32809

SUBJECT: THE HAITIAN RELIEF OF CENTRAL FLORIDA FOUNDATION  
Ref. Number: W10000012138

RECEIVED  
10 MAR 18 PM 12:18  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32399

We have received your document for THE HAITIAN RELIEF OF CENTRAL FLORIDA FOUNDATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney  
Senior Clerk  
New Filing Section

Letter Number: 110A00005953

Division of Corporations, P.O. Box 6227, Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I    NAME**

The name of the corporation shall be:

THE HAITIAN RELIEF OF CENTRAL FLORIDA FOUNDATION CoRP

**ARTICLE II    PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

5927 ANNO AVENUE, ORLANDO FL 32809

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

TO PROMOTE AWARENESS AND PROVIDE GUIDANCE TO HAITIANS IN THE CENTRAL FLORIDA COMMUNITIES AFFECTED BY THE RECENT EARTHQUAKE.

**ARTICLE IV    MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

AS PROVIDED FOR IN THE BYLAWS

**ARTICLE V    INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

RONY LOUIS, VP - 5713 RIDGE CLUB LOOP (303) ORLANDO, FL 32839

GARY CETOUTE, PRESIDENT- 506 OAKRIDGE RD, ORLANDO, FL 32809

JOEL CONSERVE, TREASURER, 5400 FITNESS CIRCLE (203) ORLANDO, FL 32839

JACQUELINE DAQUIN, ASST TREAS. 21 N TAMPA AVE, ORLANDO, FL 32805

**ARTICLE VI    INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

RONY LOUIS  
5927 ANNO AVE  
ORLANDO, FL 32809

**ARTICLE VII    INCORPORATOR**

The name and address of the Incorporator is:

HANS NAJAC  
5927 ANNO AVENUE  
ORLANDO, FL 32839

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

\_\_\_\_\_  
Signature/Registered Agent

MARCH 2, 2010  
Date

\_\_\_\_\_  
Signature/Incorporator

MARCH 2, 2010  
Date

FILED  
10 MAR 18 PM 3:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA