

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011212

FILED  
Feb 18, 2012  
Secretary of State

**Entity Name:** HAITI'S NEEDS FOUNDATION, INC.

**Current Principal Place of Business:**

4730 GOLDEN GATE PKWY - SUITE A  
NAPLES, FL 34116 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10759  
NAPLES, FL 341010759 US

**New Mailing Address:**

**FEI Number:** 27-3977706

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MATHURIN, JUDE  
5317 HARDEE STREET  
NAPLES, FL 34113 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:** VP  
**Name:** MATHURIN, JUDE  
**Address:** 5317 HARDEE STREET  
**City-St-Zip:** NAPLES, FL 34113 US

**Title:** P  
**Name:** HARRINGTON, CATHERINE M M.D.  
**Address:** 775 FIRST AVENUE N  
**City-St-Zip:** NAPLES, FL 34102 US

**Title:** D  
**Name:** BOISRON, JEAN MARIE  
**Address:** 80 DILLER AVENUE #2  
**City-St-Zip:** NEW HOLLAND, PA 17557 US

**Title:** C  
**Name:** RAMSEY, KELLY A  
**Address:** 11145 TAMiami TRAIL EAST  
**City-St-Zip:** NAPLES, FL 34113 US

**Title:** D  
**Name:** FRALICK, DAVID  
**Address:** 12693 EAST TAMiami TRAIL #236  
**City-St-Zip:** NAPLES, FL 34113 US

**Title:** C  
**Name:** SEALFON, PEGGY  
**Address:** 8805 TAMiami TRAIL N. #130  
**City-St-Zip:** NAPLES, FL 34108 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:** JUDE MATHURIN

VP

02/18/2012

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

\_\_\_\_\_  
Date