

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000011365

**FILED**  
**Jul 05, 2011**  
**Secretary of State**

**Entity Name:** FONDATION ANNE-MARIE MORISSET, INC.

**Current Principal Place of Business:**

4046 SW 159 AVENUE  
MIRAMAR, FL 33027

**New Principal Place of Business:**

**Current Mailing Address:**

4046 SW 159 AVENUE  
MIRAMAR, FL 33027

**New Mailing Address:**

**FEI Number:** 27-4229972

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEVY, ANTON  
4046 SW 159 AVENUE  
MIRAMAR, FL 33027 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: PD  
Name: TROUILLOT, LYONEL  
Address: 1601 SW 128 TERRACE #A410  
City-St-Zip: PEMBROKE INES, FL 33027

Title: VD  
Name: LEVY, JOCELYNE T  
Address: 1601 SW 128 TERRACE #A410  
City-St-Zip: PEMBROKE INES, FL 33027

Title: D  
Name: MENARD, EVELYNE T  
Address: 1601 SW 128 TERRACE #A410  
City-St-Zip: PEMBROKE INES, FL 33027

Title: SD  
Name: LEVY, ANTON  
Address: 4046 SW 159 AVENUE  
City-St-Zip: MIRAMAR, FL 33027

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: ANTON LEVY

SD

07/05/2011

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

\_\_\_\_\_  
Date