2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT



Sep 23, 2004 8:00 am Secretary of State

DOCUMENT # N9200000368 1. Enlity Náme HAITIAN AMERICAN COMMUNITY COUNCIL, INC.				09-08-2004 90	0122 032 ****61.25	
600 N CONGRESS AVENUE 600 #550 #55 DELRAY BEACH, FL 33445. US DEL		Mailing Address 600 N CONGRESS AVENUI #550 DELRAY BEACH, FL 3344		66434		
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc. 350		Suite, Apt. #, etc.		09012004 Chg-NP CR2	2E037 (10/03)	
City & State		City & State		4. FEI Number 65-0379999	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Register		
HENRY, DANIELLA 600 N CONGRESS AVENUE #550 DELRAY BEACH, FL 33445			Name Street Address	Name Street Address (P.O. Box Number is Not Acceptable)		
DELRAYE	JEACH, FL 33445		City		FL Zip Code	
	tions of registered agent.		gistered office or registe	ered agent, or both, in the State of Florida. I	am familiar with, and accept	
Filing Fee Is \$61.25 9. Election Campaign Fi Due by September 8, 2004 Trust Fund Contributi				\$5.00 May Be Added to Fees Florida De	heck payable to	
10.	ルゴル CTSTL OFFICERS AND DIR		*	Added to Fees Florida De	epartment of State	
TITLE NAME		ECTORS	11.	Added to Fees Fiorida D ADDITIONS/CHANGES TO OFFICERS AN	รับสิธิภัสส์จะในสโตโรกเกิดใหญ่จะผู้สิติสัติ	
STREET ADORESS CITY-SI-ZIP	PD ZIMMERMAN, CAROLYN 212 S.W. 2ND AVENUE DELRAY BEACH, FL 33444	ECTORS Delete	TITLE AVS NAME MA STREET ADDRESS 216	ADDITIONS/CHANGES TO OFFICERS AND TO CASTIN SCATHERINE	D DIRECTORS IN 10 Change Change	
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12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with with all other like empowered.

STREET ADDRESS

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STREET ADDRESS .

CITY - ST - ZIP

.137 S.W.:14TH AVENUE: ...

DELRAY BEACH, FL 33444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TRIBD GIVES

Daytime Phone #

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

September 10, 2004

HAITIAN AMERICAN COMMUNITY COUNCIL, INC. 600 N CONGRESS AVENUE #550
DELRAY BEACH, FL 33445 US

Subject: HAITIAN AMERICAN COMMUNITY COUNCIL, INC.

Reference Number:

N92000000368

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The person that signed the annual report/uniform business report is not listed as a current officer/director of the corporation. The person signing must be listed as a current officer/director on the report or on an attachment.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call-will-be answered in the order it is received.

/RG ANNUAL REPORTS SECTION