2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005
Secretary of State

DOCUMENT# N97000000745

Entity Name: HAITI VISION OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

5461 TEXAS AVENUE
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

P O BOX 10992
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 65-0702646 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ST. LOUIS, RAPHAEL
5461 TEXAS AVENUE
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:	PTD	( ) Delete
Name:	ST. LOUIS, RAPHAEL	
Address:	5461 TEXAS AVENUE	
City-St-Zip:	NAPLES, FL 34113	
Title:	VPSD	( ) Delete
Name:	ST. LOUIS, ANALIA	
Address:	5461 TEXAS AVENUE	
City-St-Zip:	NAPLES, FL 34113	
Title:	D	( ) Delete
Name:	ST LOUIS, MICHELET	
Address:	ZEME RUELLE LARAQUE NO. 23 BLIS	
City-St-Zip:	PORT-AU-PRINCE, HAITI, WI	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: RAPHAEL ST. LOUIS PR 01/21/2005

Electronic Signature of Signing Officer or Director — Date