

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006664

FILED
Apr 25, 2009
Secretary of State

Entity Name: HAITIAN AMERICAN GRASSROOTS COALITION, INC.

Current Principal Place of Business:

4584 N.E. 2 AVENUE
MIAMI, FL 33137 US

New Principal Place of Business:

13235 N.W 2 AVENUE
MIAMI, FL 33168 US

Current Mailing Address:

P.O. BOX 381416
MIAMI, FL 33238

New Mailing Address:

FEI Number: 65-0937003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFORTUNE, JEAN-ROBERT R
13235 N.W 2 AVENUE
MIAMI, FL 33168 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: TD () Delete
Name: WILLIAM, GEORGES
Address: 4584 NE 2 AVENUE
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: CANTAVE, WINNIE
Address: 1701 NW 167 ST
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: GAUDIN, LAVARICE
Address: 28 N.E. 54 ST
City-St-Zip: MIAMI, FL 33127

Title: SD () Delete
Name: TONDREAU, LUCIE
Address: 9822 NE 2 AVE
City-St-Zip: MIAMI, FL 33138

Title: VD () Delete
Name: BASTIEN, MARLEINE
Address: 8325 NE 2 AVE
City-St-Zip: MIAMI, FL 33138

Title: PD () Delete
Name: LAFORTUNE, JEAN R
Address: 13235 N.W 2 AVENUE
City-St-Zip: MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: MORISSEAU, YVANS
Address: 365 NE 125 STREET # 201
City-St-Zip: MIAMI, FL 33161

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

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

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 exemption stated in Chapter 119, 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: JEAN-ROBERT LAFORTUNE

MR.

04/25/2009

Electronic Signature of Signing Officer or Director

Date