2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002926

Entity Name: THE HAITIAN FAMILY ASSOCIATION INC.

FILED Sep 05, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
514 5TH A\ JACKSON\	/ENUE S. /ILLE, FL 32250		
Current Mailing Address:		New Mailing Address:	
514 5TH AVENUE S. JACKSONVILLE, FL 32250			
	59-3751305 FEI Number Applied For() FEI Nur e with s. 607.193(2)(b), F.S., the corporation did not receive t Address of Current Registered Agent:	-	
PAUL, BOC 515 5TH AV JACKSONV			
The above in the State	named entity submits this statement for the purpose of Florida.	of changing it	s registered office or registered agent, or both,
SIGNATURE:			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V () Delete PAUL, MARJORIE 514 5TH AVENUE SOUTH JACKSONVILLE BEACH, FL 32250	Title: Name: Address: City-St-Zip:	V (X) Change () Addition PAUL, MARJORIE 618 5TH AVENUE SOUTH JACKSONVILLE BEACH, FL 32250
Title: Name: Address: City-St-Zip:	VD () Delete WALLER, JULES 12971 SILVERSPRING DR JACKSONVILLE, FL 32246	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () Delete MARLENE, VANDERBEIZER 2601 UNIVERSITY BLVD N JACKSONVILLE, FL 32211	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition BERNARD, DOMOND 142 W 41 ST STREET JACKSONVILLE, FL 32204
Title: Name: Address: City-St-Zip:	SD (X) Delete YOLANDE, CHANOINE 2374 BITTERNUT WAY JACKSONVILLE, FL 32246	Title: Name: Address: City-St-Zip:	()Change()Addition
Title: Name: Address: City-St-Zip:	ST () Delete PAUL, JUDITH 514 5TH AVE. S. JACKSONVILLE, FL 32250	Title: Name: Address: City-St-Zip:	ST (X) Change () Addition PAUL, PIERRE A 8366 STERLING DR JACKSONVILLE, FL 32244
Title: Name: Address: City-St-Zip:	ST () Delete FERNAND, CIMENT 5800 BARNES RD APT 57 JACKSONVILLE, FL 32216	Title: Name: Address: City-St-Zip:	() Change () Addition

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: MARJORIE L. PAUL V 09/05/2007