

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006703

FILED
Feb 13, 2011
Secretary of State

Entity Name: HAITIAN HOPE MINISTRIES, INC.

Current Principal Place of Business:

301 SW WEST VIRGINIA
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

861 SW TOUVILLE AVE
PORT SAINT LUCIE, FL 34953

New Mailing Address:

FEI Number: 59-3610299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACQUESON, PIERRE REV
861 SW TROUVILLE AVE
PORT SAINT LUCIE, FL 34953 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: P
Name: PIERRE, JACQUESON REV
Address: 861 S W TROUVILLE AVENUE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VP
Name: GARCON, PHENIEL
Address: 6837 ATHENA
City-St-Zip: LAKE WORTH, FL 33463

Title: T
Name: SAINTIL, CAROL
Address: 1907 SW CRANBERRY ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: S
Name: JEAN-BAPTISTE, MICHELLE
Address: 2528 WILLOW LAKE APT 104
City-St-Zip: LAKE WORTH, FL 33461

Title: S
Name: PIERRE, VILIANE
Address: 861 SW TROUVILLE AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: JACQUESON PIERRE

P

02/13/2011

Electronic Signature of Signing Officer or Director

Date