

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007387

FILED
Jan 06, 2009
Secretary of State

Entity Name: ASSOCIATION TELEVISION FRANCAISE INC.

Current Principal Place of Business:

2209 SO LAKE DR
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

2209 SO LAKE DR
FORT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 65-0983184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPIERRE, ROLLAND
3030 WEST HALLANDALE
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

GUAY, VITAL PRES.
2209 S. LAKE DR.
FORT LAUDERDALE, FL 33312 US

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: VITAL GUAY

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUAY, VITAL
Address: 2209 S LAKE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VP () Delete
Name: SARRAZIN, GILLES
Address: 2 SPRUCE STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: ST () Delete
Name: LAPIERRE, ROLLAND
Address: 3030 W HALLANDALE
City-St-Zip: HALLANDALE, FL 33009

Title: D (X) Delete
Name: ROY, JANICE
Address: 317 NW 48TH COURT
City-St-Zip: POMPANO BEACH, FL 33064

Title: D (X) Delete
Name: BARIL, JACQUES
Address: 900 SW 20TH TERRACE APT 5-8
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GUAY, VITAL P
Address: 2209 S LAKE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: VP (X) Change () Addition
Name: SARRAZIN, GILLES VP
Address: 2 SPRUCE STREET
City-St-Zip: HOLLYWOOD, FL 33023 US

Title: ST (X) Change () Addition
Name: BARIL, JACQUES
Address: 900 SW 20TH TERRACE APT S-8
City-St-Zip: HALLANDALE BEACH, FL 33009 US

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: VITAL GUAY

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date