

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000002350

**Entity Name:** ORPHANS OF ISLE DE LA GONAVE D'HAITI INC

**Current Principal Place of Business:**

22 N.W. 28TH TERR.  
CAPE CORAL, FL 33993

**Current Mailing Address:**

22 N.W. 28TH TERR.  
CAPE CORAL, FL 33993 US

**FEI Number:** 82-0801466

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DESROCHE, AMECIA  
22 N.W. 28TH TERR.  
CAPE CORAL, FL 33993 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DESROCHE, AMECIA  
Address 22 N.W. 28TH TERR.  
City-State-Zip: CAPE CORAL FL 33993

Title VP  
Name DESROCHE, SAINTALES  
Address 22 N.W. 28TH TERR.  
City-State-Zip: CAPE CORAL FL 33993

Title V  
Name SMIERCIAK, DIANA LONG  
Address 3 BUCKSIN CT.  
City-State-Zip: LEMONT IL 60439

Title SV  
Name BESELEINE, DESIR  
Address 416 5TH  
City-State-Zip: DONORA PA 15033

*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:** DESROCHE, AMECIA

**REGISTER AGENT**

**02/01/2021**

Electronic Signature of Signing Officer/Director Detail

Date