

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011648

Entity Name: MERCY FOR HAITI, INC.

FILED  
Apr 17, 2007  
Secretary of State

## Current Principal Place of Business:

329 GAIT CT  
KISSIMMEE, FL 34743

## New Principal Place of Business:

## Current Mailing Address:

8724 DARTFORD PL  
INGLEWOOD, CA 90305

## New Mailing Address:

329 GAIT CT  
KISSIMMEE, FL 34743

FEI Number: 20-4297608

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DESAMOURS, ROSE D  
329 GAIT CT  
KISSIMMEE, FL 34743 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: PT ( ) Delete  
Name: DESAMOURS, ROSE D  
Address: 329 GAIT CT  
City-St-Zip: KISSIMMEE, FL 34743

Title: V ( ) Delete  
Name: MAGLOIRE, ROSE L  
Address: 12 FLINT AVE  
City-St-Zip: HEMPSTEAD, NY 11550

Title: S ( ) Delete  
Name: DESAMOURS, JULES-FRANCOIS D  
Address: 8724 DARTFORD PL  
City-St-Zip: INGLEWOOD, CA 90305

Title: D ( ) Delete  
Name: SAINT CYR, MARIE D  
Address: 98 LAS BRISAS WAY  
City-St-Zip: KISSIMMEE, FL 34743

Title: D ( ) Delete  
Name: NOEL, JEAN J  
Address: 807 W BIRCHWOOD CIR  
City-St-Zip: KISSIMMEE, FL 34743

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DESAMOURS, ROSE D  
Address: 329 GAIT CT  
City-St-Zip: KISSIMMEE, FL 34743

Title: V (X) Change ( ) Addition  
Name: SAINT CYR, MARIE D  
Address: 98 LAS BRISAS WAY  
City-St-Zip: KISSIMMEE, FL 34743

Title: S (X) Change ( ) Addition  
Name: LESPERANCE, SOUERETTE  
Address: 2410 RUTH LANE  
City-St-Zip: KISSIMMEE, FL 34743

Title: T (X) Change ( ) Addition  
Name: DUVAL, JACQUE H  
Address: 2606 LANIER RD  
City-St-Zip: KISSIMMEE, FL 34744

Title: D (X) Change ( ) Addition  
Name: MAGLOIRE, ROSE L  
Address: 12 FLINT AVE  
City-St-Zip: HEMPSTEAD, NY 11550

Title: D ( ) Change (X) Addition  
Name: LOUIS, PIERRE J  
Address: 2213 SOUTH LAKE AVE  
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSE DESAMOURS

P

04/17/2007

Electronic Signature of Signing Officer or Director

Date