

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000000009

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** THE HUMAN ADVOCATE FOUNDATION, INC.

**Current Principal Place of Business:**

6900 SILVERSTAR RD.  
SUITE 204  
ORLANDO, FL 32818 US

**New Principal Place of Business:**

**Current Mailing Address:**

6900 SILVERSTAR RD.  
SUITE 204  
ORLANDO, FL 32818 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

MOREY LAW FIRM, P.A.  
250 N. ORANGE AVE.  
SUITE 1220  
ORLANDO, FL 32801 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: BM  
Name: MOREY, JOHN A  
Address: 250 N. ORANGE AVE., SUITE 1220  
City-St-Zip: ORLANDO, FL 32801 US

Title: BM  
Name: SALARBUX, MOHAMMED Z  
Address: 6900 SILVERSTAR RD., SUITE 204  
City-St-Zip: ORLANDO, FL 32818 US

Title: BM  
Name: SALARBUX, SHADERA A  
Address: 6900 SILVERSTAR RD., SUITE 204  
City-St-Zip: ORLANDO, FL 32818 US

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: JOHN A. MOREY

BM

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date