2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N00000008083

Entity Name: MERCY FAMILY CENTER, INC.

Current Principal Place of Business:

11989 SW 56TH STREET
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

PO BOX 83-2885
MIAMI, FL 33283

New Mailing Address:

FEI Number: 65-1029969 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GUADALUPE, JORGE BISHOP
9227 SW 157TH PATH
MIAMI, FL 33196 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:	PDC	( ) Delete
Name:	GUADALUPE, JORGE BISHOP	
Address:	P.O. BOX 83-2885	
City-St-Zip:	MIAMI, FL 33283	
Title:	D	( ) Delete
Name:	MARENCO, HELLEN	
Address:	P.O. BOX 83-2885	
City-St-Zip:	MIAMI, FL 33283	
Title:	D	( ) Delete
Name:	JOSE, RAMOS J BISHOP	
Address:	P.O. BOX 83-2885	
City-St-Zip:	MIAMI, FL 33283	
Title:	VS	( ) Delete
Name:	GUADALUPE, RUTH	
Address:	P.O. BOX 83-2885	
City-St-Zip:	MIAMI, FL 33283	
Title:	D	( ) Delete
Name:	QUINONEZ, NYDIA M	
Address:	PARQUE MA. LUISA , 5FF2,URB. VILLA FONTANE	
City-St-Zip:	CAROLINA, PUERTO RICO, PR 00983	
Title:	D	(X) Delete
Name:	CALDERON, WILDREDO DR.	
Address:	P.O. BOX 83-2885	
City-St-Zip:	MIAMI, FL 33283	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	HERNAN, URRUTIA	
Address:	P.O. BOX 83-2885	
City-St-Zip:	MIAMI, FL 33283	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	MYNOR, ORRELLANA	
Address:	P.O. BOX 83-2885	
City-St-Zip:	MIAMI, FL 33283	
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: JORGE GUADALULPE PDC 05/01/2009

Electronic Signature of Signing Officer or Director — Date