

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000770

FILED  
Apr 12, 2012  
Secretary of State

Entity Name: M.A.C. HELP CENTER FOR THE POOR INC.

**Current Principal Place of Business:**

6240 DODD RD  
GREENACRES, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

6240 DODD RD  
GREENACRES, FL 33463

**New Mailing Address:**

FEI Number: 20-8908831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JEAN, FERNANDE  
6240 DODD RD  
GREENACRES, FL 33463 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: P  
Name: JEAN, FERNANDE  
Address: 6582 SPRING MEADOW DR  
City-St-Zip: GREENACRES, FL 33413

Title: T  
Name: GARNIER, DIRLOU  
Address: 6344 HARBOUR CLUB DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: D  
Name: JEAN, ROBERT J  
Address: 6582 SPRING MEADOW DR  
City-St-Zip: GREENACRES, FL 33463

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: FERNANDE JEAN

P

04/12/2012

Electronic Signature of Signing Officer or Director

Date