

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010015

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** HANDS OF LOVE OUTREACH CENTER, INC.

**Current Principal Place of Business:**

1499 N. JOHN YOUNG PKWY  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

1499 N. JOHN YOUNG PKWY  
KISSIMMEE, FL 34741

**New Mailing Address:**

FEI Number: 26-1211612

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GUADALUPE, RUTH Z  
1499 N. JOHN YOUNG PKWY  
KISSIMMEE, FL 34741 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: GUADALUPE, RUTH Z  
Address: 1499 N. JOHN YOUNG PKWY  
City-St-Zip: KISSIMMEE, FL 34741

Title: T  
Name: MARIN, JESSICA  
Address: 1499 N. JOHN YOUNG PKWY  
City-St-Zip: KISSIMMEE, FL 34741

Title: SEC  
Name: COLON, KARELYS  
Address: 1499 N. JOHN YOUNG PKWY  
City-St-Zip: KISSIMMEE, FL 34741

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: RUTH Z GUADALUPE

P

04/30/2011

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

\_\_\_\_\_ Date