

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000010995

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** HOPE OUTREACHED COMMUNITY CENTER INC.

**Current Principal Place of Business:**

5840 WASHINGTON STREET  
SUITE # 5  
HOLLYWOOD, FL 33023 BR

**New Principal Place of Business:**

**Current Mailing Address:**

5814 WILEY STREET  
HOLLYWOOD, FL 33023 BR

**New Mailing Address:**

**FEI Number:** 27-1344550

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TAYLOR-DUNCAN, MAIZELIN D  
5814 WILEY STREET  
HOLLYWOOD, FL 33023 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:** PRES  
**Name:** TAYLOR-DUNCAN, MAZELIN D  
**Address:** 5814 WILEY STREET  
**City-St-Zip:** HOLLYWOOD, FL 33023

**Title:** VP  
**Name:** ABDULLAH-ALLI, SHARON E  
**Address:** 5082 N W 195 TERRACE  
**City-St-Zip:** MIAMI, FL 33055 DA

**Title:** SECT  
**Name:** TAYLOR, PAMALA  
**Address:** 7748 SAIRWAY BLVD.  
**City-St-Zip:** MIRAMAR, FL 33023 BR

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:** MAIZELIN D TAYLOR-DUNCAN

PRES

04/26/2012

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

\_\_\_\_\_  
Date