

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001883

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** UNITED COMMUNITY HELP CENTER, INC.

**Current Principal Place of Business:**

241 NE PRIMA VISTA BLVD  
PORT SAINT LUCIE, FL 34983 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 8064  
PORT SAINT LUCIE, FL 34985 US

**New Mailing Address:**

**FEI Number:** 27-1961413

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEJIA, GUERLINE  
771 E PRIMA VISTA BLVD  
PORT SAINT LUCIE, FL 34952 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:** ADM  
**Name:** MEJIA, GUERLINE  
**Address:** 771 E PRIMA VISTA BLVD  
**City-St-Zip:** PORT SAINT LUCIE, FL 34952 US

**Title:** SEC  
**Name:** JEAN-BAPTISTE, MARIE J  
**Address:** 1193 SE SABINA LANE  
**City-St-Zip:** PORT ST LUCIE, FL 34983 US

**Title:** COOR  
**Name:** JEANTUS, JULIE  
**Address:** 1230 EMERALD AVE  
**City-St-Zip:** PORT ST LUCIE, FL 34953

**Title:** COOR  
**Name:** ANTENOR, GERALDA  
**Address:** 1230 SW EMERALD AVE  
**City-St-Zip:** PORT ST LUCIE, FL 34953

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:** GUERLINE MEJIA

ADM

04/10/2012

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

\_\_\_\_\_  
Date