2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 14, 2012
Secretary of State

DOCUMENT# N97000004488

Entity Name: MY BROTHER'S KEEPER CENTER, INC.

Current Principal Place of Business:

311 N. 25TH STREET
FORT PIERCE, FL 34947

New Principal Place of Business:

Current Mailing Address:

311 N. 25TH STREET
FORT PIERCE, FL 34947

New Mailing Address:

FEI Number: 65-0777598 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OSMI, MAURIL
1102 YORK AVE
FORT PIERCE, FL 34982 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: PD
Name: OSMI, MAURIL
Address: 1102 YORK AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: V
Name: BERTEAU, NAZAIRE
Address: 4325 S MARY CIR
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D
Name: WILSEAU, BISRTTE
Address: 313 NORTH 25 ST
City-St-Zip: FORT PIERCE, FL 34947

Title: D
Name: LOUIS, DIEULA
Address: 5443 N W WISK TER N CIR
City-St-Zip: PORT ST LUCIE, FL 34986

Title: D
Name: MERISIER, SAMUEL
Address: 500 N CONGRES AVE #180
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D
Name: MARGLIEN, SANTUS D
Address: 391 CARDINAL.M AVE APT 6
City-St-Zip: CAMBRIDGE MASS, FL 02141

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: OSMI MAURIL PD 04/14/2012
Electronic Signature of Signing Officer or Director Date