

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006106

FILED
Sep 10, 2010
Secretary of State

Entity Name: ST. LUCIE COUNTY HUMAN RESOURCE ASSOCIATION, INC.

Current Principal Place of Business:

900 VIRGINIA AVENUE
16
FORT PIERCE, FL 34982 US

New Principal Place of Business:

584 NW UNIVERSITY BLVD
STE. 100
PORT ST. LUCIE, FL 34986 US

Current Mailing Address:

P.O. BOX 12274
FORT PIERCE, FL 349792274

New Mailing Address:

FEI Number: 65-0828540 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GARRETT, ERICA
900 VIRGINIA AVENUE, SUITE 16
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

VERA-AVILES, ROSALINDA
584 NW UNIVERSITY BLVD
STE. 100
PORT ST. LUCIE, FL 34986 US

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: ROSALINDA VERA-AVILES

09/10/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: VERA-AVILES, ROSALINDA
Address: P.O. BOX 12274
City-St-Zip: FORT PIERCE, FL 34979

Title: VP
Name: USSERY, ALISHA
Address: P.O. BOX 12274
City-St-Zip: FORT PIERCE, FL 34979

Title: T
Name: STALLS, VICTORIA
Address: P.O. BOX 12274
City-St-Zip: FORT PIERCE, FL 34979

Title: SEC
Name: PAPPADOUPLOS, JENNIFER
Address: P.O. BOX 12274
City-St-Zip: FORT PIERCE, FL 34979

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: VICTORIA STALLS

T

09/10/2010

Electronic Signature of Signing Officer or Director

Date