

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000044466

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** ORLANDO HELP CENTER, INC.

**Current Principal Place of Business:**

21 N TAMPA AVENUE  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

21 N TAMPA AVENUE  
ORLANDO, FL 32805

**New Mailing Address:**

**FEI Number:** 20-8813305

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAQUIN, JACQUELIN SR  
21 N TAMPA AVENUE  
ORLANDO, FL 32805 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: DAQUIN, JACQUELIN SR  
Address: 21 N TAMPA AVANUE  
City-St-Zip: ORLANDO, FL 32805

Title: VP  
Name: DAQUIN, SABINE  
Address: 21 N TAMPA AVENUE  
City-St-Zip: ORLANDO, FL 32805

Title: S  
Name: MARIE ARLANDE, GRAND PIERRE  
Address: 932 CATHERINE STREET  
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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JACQUELIN DAQUIN

PRES

04/27/2012

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

\_\_\_\_\_  
Date