

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90093 045 ****70.00

DOCUMENT # N01000006743

1. Entity Name
PEOPLE HELPING EACH OTHER INCORPORATED



Principal Place of Business
**1414 BRONSON STREET
PALATKA, FL 32177**

Mailing Address
**P.O. BOX 38
PALATKA, FL 32178**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04152004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
58-2651108

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEWIS, THRESSA B
1414 BRONSON STREET
PALATKA, FL 32177**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **THOMAS, LALITA**
STREET ADDRESS **1414 BRONSON STREET**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☐ Delete
NAME **WRIGHT, REGINA**
STREET ADDRESS **1414 BRONSON STREET**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☒ Delete
NAME **CHESTERON, TERRANCE**
STREET ADDRESS **1414 BRONSON STREET**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☐ Delete
NAME **WILLIAMS, TERRANCE**
STREET ADDRESS **1414 BRONSON STREET**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☐ Delete
NAME **DEMPS, FREDERICK T**
STREET ADDRESS **1414 BRONSON STREET**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **P** ☐ Delete
NAME **LEWIS, BERNARD**
STREET ADDRESS **1414 BRONSON STREET**
CITY-ST-ZIP **PALATKA, FL 32177**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME **Thomas, Lalita**
STREET ADDRESS **2406 Leigh Terrace**
CITY-ST-ZIP **Palatka, FL 32177**

TITLE **D** ☒ Change ☐ Addition
NAME **Owens, Regina**
STREET ADDRESS **515 North 19th Street**
CITY-ST-ZIP **Palatka, FL 32177**

TITLE **D** ☐ Change ☒ Addition
NAME **Katrinia McKnight**
STREET ADDRESS **125 Arden Drive**
CITY-ST-ZIP **Palatka, FL 32177**

TITLE **D** ☒ Change ☐ Addition
NAME **Williams, Terence**
STREET ADDRESS **219 Holly Lane**
CITY-ST-ZIP **Palatka, FL 32177**

TITLE **D** ☒ Change ☐ Addition
NAME **Demps, Frederick T.**
STREET ADDRESS **100 Robinson Avenue**
CITY-ST-ZIP **Palatka, FL 32177**

TITLE **P** ☒ Change ☐ Addition
NAME **Lewis, Bernard**
STREET ADDRESS **1129 South 15th Street**
CITY-ST-ZIP **Palatka, FL 32177**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bernard Lewis* (Bernard Lewis) 4/18/04 546-1066
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

44033056

#N01000006743

Division of Corporations
2004 Not-For-Profit Corporation
Annual Report

11. Additional Officer

Title D
Name Mary Thomas
St. Address 2017 Crill Avenue
City/State Palatka, FL 32177
