2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004
Secretary of State

DOCUMENT# N03000010237

Entity Name: HELP BRINGS HOPE FOR HAITI, INC.

Current Principal Place of Business:

2617 PROSPECT RD
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

2617 PROSPECT RD
TAMPA, FL 33629

New Mailing Address:

FEI Number: 30-0218645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JEFFRIES, DAVID M
101 E KENNEDY BLVD STE 3000
TAMPA, FL 336035884 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: D ( ) Delete
Name: EDDY, PATRICIA
Address: 2617 PROSPECT RD
City-St-Zip: TAMPA, FL 33629

Title: D ( ) Delete
Name: BYARS, BARBARA
Address: 417 S PALOMA PL
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete
Name: PAVESE, STEPHANIE
Address: 2109 BAYSHORE BLVD #808
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BYARS, BARBARA A
Address: 417 S PALOMA PL
City-St-Zip: TAMPA, FL 33609

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: BARBARA A BYARS D 02/23/2004

Electronic Signature of Signing Officer or Director — Date