

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002880

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** HANDS UP CORPORATION OF AMERICA

**Current Principal Place of Business:**

4525 WATERSIDE POINTE CIRCLE  
ORLANDO, FL 32829

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 141447  
ORLANDO, FL 32814

**New Mailing Address:**

**FEI Number:** 84-1644894      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WILLIAMS, JOSEPH M ESQ.  
1701 J. L. REDMOND PKWY  
PLANT CITY, FL 33563 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HIGHSMITH, VENUS D  
Address: 4525 WATERSIDE POINTE CIRCLE  
City-St-Zip: ORLANDO, FL 32829

Title: V ( ) Delete  
Name: LAWANDA, GRAY M  
Address: 3003 SLIPPERY ROCK COURT  
City-St-Zip: COLUMBUS, GA 31909

Title: S ( ) Delete  
Name: HIGHSMITH, REBECCA R  
Address: 2313 W. 10TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: WILLIAMS, JOSEPH M  
Address: 1701 J. L. REDMOND PKWY  
City-St-Zip: PLANT CITY, FL 33563

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: VENUS HIGHSMITH

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date