

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008565

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** HELP AFRICA EMERGE, INC.

**Current Principal Place of Business:**

5735 ALAMOSA CIRCLE  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

**Current Mailing Address:**

5735 ALAMOSA CIRCLE  
JACKSONVILLE, FL 32258

**New Mailing Address:**

FEI Number: 27-0986775

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BITTY-REID, MARIE P  
5735 ALAMOSA CIRCLE  
JACKSONVILLE, FL 32258 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: BITTY-REID, MARIE P  
Address: 5735 ALAMOSA CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP  
Name: REID, DAVID VP  
Address: 5735 ALAMOSA CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: D  
Name: KONAN, KOUASSI D  
Address: 10815 KURALEI DR.  
City-St-Zip: JACKSONVILLE, FL 32246

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: MARIE BITTY-REID

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date