2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766698

Entity Name: ENGLEWOOD HELPING HAND, INC.

Current Principal Place of Business:

700 E. DEARBORN ST. ENGLEWOOD. FL 34223

Current Mailing Address:

PO BOX 791

ENGLEWOOD. FL 34295-0791 US

FEI Number: 59-2259063 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSEMEYER, LAURA L 571 FOXWOOD BLVD ENGLEWOOD, FL 34223 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: LAURA ROSEMEYER 01/17/2017

Electronic Signature of Registered Agent

Date

FILED Jan 17, 2017

Secretary of State

CC3783454917

Officer/Director Detail:

Title PRESIDENT Title TREASURER

NameMIHALEY, LORI-NANNameROSEMEYER, LAURAAddress741 W. PERRY STREETAddress571 FOXWOOD BLVD

City-State-Zip: ENGLEWOOD FL 34223 City-State-Zip: ENGLEWOOD FL 34223

Title DIRECTOR Title DIRECTOR

Name GARRISON, CHRISTINE Name WHIPPLE, DALE

Address 2191 KEYWAY ROAD Address 1047 KANT STREET

City-State-Zip: ENGLEWOOD FL 34223 City-State-Zip: ENGLEWOOD FL 34224

Title RECORDING SECRETARY Title DIRECTOR

Name HIPPS, ROSE Name SANDNESS, MARGERY

Address 700 DEARBORN ST Address 2960 TOWHEE ST

City-State-Zip: ENGLEWOOD FL 34223 City-State-Zip: ENGLEWOOD FL 34224

Title DIRECTOR

Name STEPHAN, HELEN

Address 9033 COACHMAN DR

City-State-Zip: VENICE FL 34293

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: LAURA ROSEMEYER TREASURER 01/17/2017

Electronic Signature of Signing Officer/Director Detail

Date