2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000000978

Entity Name: HANDS OF MERCY EVERYWHERE, INC.

Current Principal Place of Business:

6017 SE ROBINSON RD BELLEVIEW, FL 34420

Current Mailing Address:

6017 SE ROBINSON RD BELLEVIEW, FL 34420 US

FEI Number: 59-3630008

Name and Address of Current Registered Agent:

WISEMAN, ROBERTA 16632 SE 2ND LN SILVER SPRINGS, FL 34488 US Certificate of Status Desired: Yes

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

Officer/Director Detail :

Title	S	Title	BM
Name	WISEMAN, ROBERTA	Name	OCHOA, JENNIFER
Address	16632 SE 2ND LN	Address	1054 SE 69TH AVE
City-State-Zip:	SILVER SPRINGS FL 34488	City-State-Zip:	OCALA FL 34472
Title	Р	Title	BOARD MBR
Name	SCHOFIELD, DIANE	Name	CRYSLER, CASEY
Address	1758 SE 8TH ST	Address	2202 SE 24 TERR
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471
Title	т	Title	VP
Title Name	T LEWIS, JESSICA	Title Name	VP WALKER, ALICIA
Name	LEWIS, JESSICA	Name	WALKER, ALICIA PO BOX 1987
Name Address	LEWIS, JESSICA 12048 SE 72ND TERR RD	Name Address	WALKER, ALICIA PO BOX 1987
Name Address City-State-Zip:	LEWIS, JESSICA 12048 SE 72ND TERR RD BELLEVIEW FL 34420	Name Address City-State-Zip:	WALKER, ALICIA PO BOX 1987 OCALA FL 34475
Name Address City-State-Zip: Title	LEWIS, JESSICA 12048 SE 72ND TERR RD BELLEVIEW FL 34420 BOARD MBR	Name Address City-State-Zip: Title	WALKER, ALICIA PO BOX 1987 OCALA FL 34475 FINANCE & PROPERTY MANAGER
Name Address City-State-Zip: Title Name	LEWIS, JESSICA 12048 SE 72ND TERR RD BELLEVIEW FL 34420 BOARD MBR LABAGH, AARON	Name Address City-State-Zip: Title Name	WALKER, ALICIA PO BOX 1987 OCALA FL 34475 FINANCE & PROPERTY MANAGER GRIFFIN, CAROL 6017 SE ROBINSON RD

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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: CAROL GRIFFIN

FINANCE & PROPERTY 06/28/2019 MANAGER

Electronic Signature of Signing Officer/Director Detail

FILED Jun 28, 2019 Secretary of State 0610087327CC

Date

Officer/Director Detail Continued :

Title	COO
Name	DEEN, AIMEE
Address	6017 SE ROBINSON RD
City-State-Zip:	BELLEVIEW FL 34420