

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000978

FILED
Mar 07, 2016
Secretary of State
CC0305666558

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

FEI Number: 59-3630008

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WISEMAN, ROBERTA
16632 SE 2ND LANE
SILVER SPRINGS, FL 34488 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

Officer/Director Detail :

Title SECRETARY
Name WISEMAN, ROBERTA
Address 16632 SE 2ND LANE
City-State-Zip: SILVER SPRINGS FL 34488

Title BOARD MEMBER
Name OCHOA, JENNIFER
Address 1054 SE 69TH AVE.
City-State-Zip: OCALA FL 34472

Title PRESIDENT
Name SCHOFIELD, DIANE
Address 16482 SE 3RD ST
City-State-Zip: SILVER SPRINGS FL 34488

Title BOARD MBR
Name DEEN, AIMEE
Address 37 TEAK LOOP
City-State-Zip: OCALA FL 34472

Title BOARD MBR
Name CRYSLER, CASEY
Address 2202 SE 24 TERRACE
City-State-Zip: OCALA FL 34471

Title BOARD MBR
Name DAVIS, MALANEE
Address P.O. BOX 830836
City-State-Zip: OCALA FL

Title TREASURER
Name LEWIS, JESSICA
Address 12048 SE 72ND TERR RD
City-State-Zip: BELLEVIEW FL 34420

Title BOARD MBR
Name WALKER, ALICIA
Address PO BOX 1987
City-State-Zip: OCALA FL 34475

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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: DIANE SCHOFIELD

CEO

03/07/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOARD MBR
Name GERRITY, LORRAINE
Address 5740 S.E. 23RD LANE
City-State-Zip: OCALA FL 34480

Title BOARD MBR
Name LABAGH, AARON
Address 420 S.E. 8TH STREET
City-State-Zip: OCALA FL 34471