## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003288

Entity Name: BOCA HELPING HANDS, INC.

**Current Principal Place of Business:** 

1500 NW 1ST CT.

BOCA RATON, FL 33432

FILED
Mar 31, 2016
Secretary of State
CC0441277303

## **Current Mailing Address:**

1500 NW 1ST CT.

BOCA RATON, FL 33432

FEI Number: 31-1713631 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI (DAG) 525 OKEECHOBEE BLVD. SUITE 1100 WEST PALM BEACH, FL 33401 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 D/T Title D/P

NameJAIVEN, JACKNamePETERS, GARYAddress3912 SOUTH OCEAN BLVD, #1114Address6013 LE LAC ROAD

City-State-Zip: HIGHLAND BEACH FL 33487 City-State-Zip: BOCA RATON FL 33496

Title D/V Title DIRECTOR

NameSHAW, ERIC DR.NameBROCKWAY, PETERAddress500 SOUTH OCEAN BLVD, #2105Address443 ROYAL PALM WAY

NONE

City-State-Zip: BOCA RATON FL 33432 City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR Title DIRECTOR

NameTROADEC, ALAINNameROBINSON, TANDYAddress830 SE 4TH COURTAddress503 OLEANDER DRIVE

City-State-Zip: DEERFIELD BEACH FL 33441 City-State-Zip: DELRAY BEACH FL 33483

Title DIRECTOR Title DIRECTOR

Name PATRICIA, DAMRON Name HAGEN, ANDREW

Address 2038 THATCH PALM DRIVE Address 7000 NW 5TH AVENUE

NONE

City-State-Zip: BOCA RATON FL 33432 City-State-Zip: BOCA RATON FL 33487

### Continues on page 2

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: JACK JAIVEN TREASURER 03/31/2016

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name HAZLE, GREGORY

Address 4453 WOODFIELD BLVD.

NONE

City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR
Name COOMBS, RON

Address 2920 NW 26TH COURT

NONE

City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR
Name BORG, DEAN

Address 4880 HUNTERS WAY

NONE

City-State-Zip: BOCA RATON FL 33434