

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000004664

**Entity Name:** HANDS ON ORLANDO, INC.

**Current Principal Place of Business:**

1850 LEE ROAD  
SUITE 220  
WINTER PARK, FL 32789

**Current Mailing Address:**

1850 LEE ROAD  
SUITE 220  
WINTER PARK, FL 32789 US

**FEI Number:** 59-3660188

**Certificate of Status Desired:** No

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

TRAGER, KYLE J  
1850 LEE ROAD  
220  
WINTER PARK, FL 32789 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:** KYLE J TRAGER

04/11/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER, DIRECTOR  
Name           HICKEY, KEVIN  
Address        1850 LEE ROAD  
                  SUITE 220  
City-State-Zip: WINTER PARK FL 32789

Title           CHAIRMAN, SECRETARY, DIRECTOR  
Name           HURLEY, FLORENCE  
Address        1850 LEE ROAD  
                  SUITE 220  
City-State-Zip: WINTER PARK FL 32789

Title           DIRECTOR  
Name           ANDE, MEENA  
Address        1850 LEE ROAD  
                  SUITE 220  
City-State-Zip: WINTER PARK FL 32789

Title           EXECUTIVE DIRECTOR  
Name           TRAGER, KYLE J  
Address        1850 LEE ROAD  
                  SUITE 220  
City-State-Zip: WINTER PARK FL 32789

*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:** KYLE J TRAGER

EXECUTIVE DIRECTOR

04/11/2022

Electronic Signature of Signing Officer/Director Detail

Date