

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01064

Entity Name: LOVING HANDS MINISTRIES, INC.**Current Principal Place of Business:**9511 36 AVE E
PALMETTO, FL 34221**Current Mailing Address:**P.O. BOX 1157
BRADENTON, FL 34206-1157 US**FEI Number:** 59-2573982**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VANBLARCOM, JOSEPH ESQ.
9511 36 AVE E
PALMETTO, FL 34221 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:** JOSEPH VANBLARCOM

06/26/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WILSON-DODSON, KIMBERLY F
Address 5808 TRAVISTA PL
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name WILSON, DONALD
Address 5116 MELBOURNE STREET
 UNIT # 2104
City-State-Zip: PUNTA GORDA FL 34223

Title DIRECTOR
Name RHOADES, DAVID
Address 2680 TEMPLE ST
City-State-Zip: SARASOTA FL 34239

Title DIRECTOR, TREASURER,
 SECRETARY
Name VANBLARCOM, JOSEPH ESQ.
Address 9511 36TH AVENUE EAST
City-State-Zip: PALMETTO FL 34222

Title DIRECTOR
Name HENSEL, JOHN R.
Address 1299 PIPER RD.
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name HILD, WILLIAM H. JR.
Address 1670 MAIN ST
 STE 200
City-State-Zip: SARASOTA FL 34236

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: /S/ JOSEPH VANBLARCOM**CORPORATE
SECRETARY**

06/26/2020

Electronic Signature of Signing Officer/Director Detail

Date