GNATURE: AISHA WRIGHT	

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N09162

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: HELP OF FORT MEADE, INC.

### **Current Principal Place of Business:**

202 W. BROADWAY FORT MEADE. FL 33841

### **Current Mailing Address:**

202 W. BROADWAY FORT MEADE. FL 33841 US

### FEI Number: 59-2993886

# Name and Address of Current Registered Agent:

WOODS, MIKE 202 W. BROADWAY FORT MEADE, FL 33841 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	: MIKE WOODS			03/27/2018
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	PRESIDENT	Title	DIRECTOR	
Name	WOODS, MIKE	Name	BELL, MELONY	
Address	455 N BROADWAY	Address	412 N LANIER AVE	
City-State-Zip:	BARTOW FL 33830	City-State-Zip:	FORT MEADE FL 33841	
Title	DIRECTOR	Title	DIRECTOR	
Name	WHITNER, SUZIE	Name	STEDEM, MIKE	
Address	407 LANIER ROAD	Address	3200 HWY 17 N	
City-State-Zip:	FORT MEADE FL 33841	City-State-Zip:	FORT MEADE FL 33841	
Title	VP	Title	DIRECTOR	
Name	CORNELIUS, CLINTON	Name	GRANDMONT, MARGARET	
Address	720 N ORANGE AVE	Address	PO BOX 903	
City-State-Zip:	FOT MEADE FL 33841	City-State-Zip:	FORT MEADE FL 33841	
Title	DIRECTOR	Title	DIRECTOR	
Name	RUSSELL, MARY JO	Name	WILLIAMS, PHILLIP	
Address	8 WEST BROADWAY ST	Address	10 S SEMINOLE AVE	
City-State-Zip:	FORT MEADE FL 33841	City-State-Zip:	FORT MEADE FL 33841	

## 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.

SIG

03/27/2018 EXECUTIVE DIRECTOR

Date

## FILED Mar 27, 2018 Secretary of State CC9719331305

Certificate of Status Desired: No

#### **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	WRIGHT, AISHA
Address	612 N LANIER AVE
City-State-Zip:	FORT MEADE FL 33841