

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010749

**FILED**  
**Mar 27, 2015**  
**Secretary of State**  
**CC3001643097**

**Entity Name:** OPEN HEART AND HELPING HANDS COMMUNITY RESOURCE CENTER, INC.

**Current Principal Place of Business:**

5888 NW HIGHWAY 41  
LAKE CITY, FL 32055

**Current Mailing Address:**

POST OFFICE BOX 3128  
LAKE CITY, FL 32056

**FEI Number: 90-0908324**

**Certificate of Status Desired: No**

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

JORDAN, GLORIA  
688 SW COUNTY ROAD 242-A  
LAKE CITY, FL 32025 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 PD  
Name JORDAN, DAVID LSR.  
Address 688 SW COUNTY ROAD 242-A  
City-State-Zip: LAKE CITY FL 32025

Title VD  
Name JORDAN, GLORIA  
Address 688 SW COUNTY ROAD 242-A  
City-State-Zip: LAKE CITY FL 32025

Title TD  
Name LUKE, AMANDA  
Address 435 NE WASHINGTON STREET  
City-State-Zip: LAKE CITY FL 32055

Title SD  
Name FLEMING, BUDDY A.  
Address 688 SW COUNTY ROAD 242-A  
City-State-Zip: LAKE CITY FL 32025

Title D  
Name CHATMON, MICHAEL  
Address 688 SW COUNTY ROAD 242-A  
City-State-Zip: LAKE CITY FL 32025

Title D  
Name WILSON, JOYCE  
Address 5888 NW HIGHWAY 41  
City-State-Zip: LAKE CITY FL 32055

*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: GLORIA JORDAN**

**VD**

**03/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date