#### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000011476

Entity Name: RHEUMATOID ARTHRITIS FOUNDATION, HELP FIGHT RA, INC.

FILED
May 01, 2013
Secretary of State
CC5501894258

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

1300 PLEASANTRIDGE PL ORLANDO, FL 32835

## **Current Mailing Address:**

1300 PLEASANTRIDGE PL ORLANDO, FL 32835

FEI Number: 46-1540546 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD SUITE A TAMPA, FL 33612 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 P Title

NameBUCHHOLZ, MARCNameFOULKES, MICHELLEAddress1300 PLEASANTRIDGE PLAddress1300 PLEASANTRIDGE PL

City-State-Zip: ORLANDO FL 32835 City-State-Zip: ORLANDO FL 32835

Title D Title D

Name COOPER, JOHN Name MCGEE, GLYNNE

Address 1300 PLEASANTRIDGE PL
City-State-Zip: ORLANDO FL 32835 Address 1300 PLEASANTRIDGE PL
City-State-Zip: ORLANDO FL 32835

Title D

Name BUCHHOLZ, SANDRA
Address 1300 PLEASANTRIDGE PL
City-State-Zip: ORLANDO FL 32835

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: SANDRA BUCHHOLZ

Electronic Signature of Signing Officer/Director Detail

CEO, FOUNDER

05/01/2013

Date