2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2021
Secretary of State
1861584229CC

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Entity Name: HANDS OF HOPE-SICKLE CELL AWARENESS FOUNDATION INC.

Current Principal Place of Business:

11213 N. NEBRASKA AVENUE
404
TAMPA, FL 33612

Current Mailing Address:

11213 N. NEBRASKA AVENUE
404
TAMPA, FL 33612 US

FEI Number: 46-2810241

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BELLAMY-WARD, ETHEL L
3201 E. ELM STREET
TAMPA, FL 33610 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: ETHEL L BELLAMY-WARD 03/24/2021

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	MITCHELL, CECELIA K
Address	4502 N. 40TH STREET
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	FERRELL III, GRADY
Address	4415 BOOKER T. DRIVE
City-State-Zip:	TAMPA FL 33610

Title	SECRETARY
Name	ANDERSON, ATYIA K
Address	5002 N. 39TH STREET
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	JOHNSON-WILLAIMS, SHELIA
Address	2014 E. NORTH BAY STREET
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	WILLIAMS, SHARONDA
Address	12220 N. 16TH STREET APT.439
City-State-Zip:	TAMPA FL 33612

Title	DIRECTOR
Name	ROMO, TONY
Address	6817 BELLE SHADOW LANE
City-State-Zip:	TAMPA FL 33634

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: CECELIA MITCHELL EXECUTIVE DIRECTOR 03/24/2021

Electronic Signature of Signing Officer/Director Detail — Date