

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004608

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

FILED
Mar 08, 2023
Secretary of State
6098385496CC

Current Principal Place of Business:

11213 N. NEBRASKA AVENUE
401
TAMPA, FL 33612

Current Mailing Address:

11213 N. NEBRASKA AVENUE
401
TAMPA, FL 33612 US

FEI Number: 46-2810241

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, TRAVIA
5002 N. 39TH 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: TRAVIA ANDERSON

03/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

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

Title DIRECTOR
Name JONES, RODNEY
Address 18120 SUGAR BROOKE DRIVE
City-State-Zip: TAMPA FL 33647

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

DIRECTOR

03/08/2023

Electronic Signature of Signing Officer/Director Detail

Date