2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000011334

Entity Name: WE HELP COMMUNITIES "2" DEVELOP CORPORATION

FILED Feb 03, 2021 Secretary of State 6219941963CC

Current Principal Place of Business:

349 S. E. 3RD STREET BELLE GLADE. FL 33430

Current Mailing Address:

P. O. BOX 1786

BELLE GLADE. FL 33430 US

FEI Number: 47-2533639 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BARBER, MOSES 349 S. E. 3RD STREET BELLE GLADE, FL 33430 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 PRESIDENT Title SEC.

Name TURNER, SHIRLEY WALKER Name PETERSON, QUESONA D

Address P. O. BOX 1786 Address 584 S. W. 5TH STREET APT # 1

City-State-Zip: BELLE GLADE FL 33430 City-State-Zip: BELLE GLADE FL 33430

Title TRES Title CFO

NameSEWELL, ANGELETTA TNameASSON, ELDONAddressP. O. BOX 1786AddressP. O. BOX 1786

City-State-Zip: BELLE GLADE FL 33430 City-State-Zip: BELLE GLADE FL 33430

Title BOARD MEMBER Title BOARD MEMBER

Name GAINES, LORETTA Name WALKER, RALPH WENDELL

Address P. O. BOX 1786 Address P. O. BOX 1786

City-State-Zip: BELLE GLADE FL 33430 City-State-Zip: BELLE GLADE FL 33430

Title BOARD MEMBER
Name ELIJAH, EUGENIA
Address P. O. BOX 1786

City-State-Zip: BELLE GLADE FL 33430

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: QUESONA D. PETERSON SEC. 02/03/2021

Electronic Signature of Signing Officer/Director Detail

Date