

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000011015

**Entity Name:** GIVING HANDS FOUNDATION INCORPORATED

**Current Principal Place of Business:**

11406 N.DALE MABRY HWY  
206  
TAMPA, FL 33618

**Current Mailing Address:**

11406 N.DALE MABRY HWY  
206  
TAMPA, FL 33618

**FEI Number: 47-3507057**

**Certificate of Status Desired: No**

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

HOWARD, VANESSA R  
1192 MULTIFLORA LOOP  
LUTZ, FL 33558 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  
Name HOWARD, VANESSA R  
Address 1192 MULTIFLORA LOOP  
City-State-Zip: LUTZ FL 33558

Title VP  
Name BROOKS, SHARDE E  
Address 10156 MONTAGE ST.  
City-State-Zip: TAMPA FL 33626

Title S  
Name BROOKS, TRENNACE S  
Address 12035 CITRUS FALLS CIRCLE APT 203  
City-State-Zip: TAMPA FL 33625

*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: VANESSA HOWARD**

**PRESIDENT**

**04/06/2018**

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

\_\_\_\_\_  
Date