

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000008294

**Entity Name:** HELENS HOUSE, INC.**Current Principal Place of Business:**2330 JOHNNY ELLISON DRIVE  
MELBOURNE, FL 32901**Current Mailing Address:**2330 JOHNNY ELLISON DRIVE  
MELBOURNE, FL 32901 US**FEI Number:** 83-1655259**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MORROW, BRYAN B. PRESIDENT  
2330 JOHNNY ELLISON DRIVE  
MELBOURNE, FL 32901 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:** BRYAN MORROW

02/22/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MORROW, BRYAN B JR  
Address 4340 DONCASTER DRIVE  
City-State-Zip: MELBOURNE FL 32935

Title S  
Name MORROW, TERRI  
Address 4340 DONCASTER DRIVE  
City-State-Zip: MELBOURNE FL 32935

Title T  
Name SLATE, JAMES D  
Address 1370 GARWOOD DRIVE  
City-State-Zip: MELBOURNE FL 32904

Title D  
Name GUINN, WAYNE  
Address 877 N HIGHWAY A1A UNIT 603  
City-State-Zip: INDIALANTIC FL 32903

Title D  
Name FADDEN, CHRISTOPHER J  
Address 302 RIVERSIDE DRIVE  
City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR  
Name ELLISON, BRIAN  
Address 2450 JUDGE FRAN JAMIESON WAY  
UNIT 2105  
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR  
Name ETHRIDGE, TREY  
Address 4450 PORTAGE TRAIL  
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR  
Name GANDOLFO, LUCIAN  
Address 620 BAYTREE DRIVE  
City-State-Zip: MELBOURNE FL 32940

**Continues on page 2**

*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:** BRYAN B. MORROW, JR.**EXECUTIVE DIRECTOR**

02/22/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	ARBOGAST, MICHAEL
Address	108 W. NEW HAVEN AVENUE
City-State-Zip:	MELBOURNE FL 32901