

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000170008

**Entity Name:** HOUSING HELPERS, INCORPORATED

**Current Principal Place of Business:**

1961 WISCONSIN AVE.  
ENGLEWOOD, FL 34224

**Current Mailing Address:**

1961 WISCONSIN AVE.  
ENGLEWOOD, FL 34224

**FEI Number:** 84-1106032

**Certificate of Status Desired:** No

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

SMITH, THOMAS J.  
1961 WISCONSIN AVE.  
ENGLEWOOD, FL 34224 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           | PT                  | Title           | VPS                   |
| Name            | SMITH, THOMAS J.    | Name            | WILLIAMS, LAURANNA L. |
| Address         | 1961 WISCONSIN AVE. | Address         | 1961 WISCONSIN AVE.   |
| City-State-Zip: | ENGLEWOOD FL 34224  | City-State-Zip: | ENGLEWOOD FL 34224    |

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS J. SMITH

PT

04/28/2014

Electronic Signature of Signing Officer/Director Detail

Date