

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000771

Entity Name: HELPSIDE INC**Current Principal Place of Business:**395 W 600 N
LINDON, UT 84042**Current Mailing Address:**395 W 600 N
LINDON, UT 84042 US**FEI Number:** 87-0476353**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR, OWNER
Name WRIGHT, BJ
Address PO BOX 1053
City-State-Zip: MIDWAY UT 84049

Title DIRECTOR, OWNER
Name BARTHOLOMEW, LARRY
Address 1974 N CASCADE CANYON DRIVE
City-State-Zip: ST. GEORGE UT 84770

Title PRESIDENT, CEO, OWNER
Name BARTHOLOMEW, RICK
Address 3006 N 650 W
City-State-Zip: PLEASANT GROVE UT 84062

Title TREASURER, CFO, OWNER
Name BARTHOLOMEW, JOHN
Address 2711 E GRANITE WAY
City-State-Zip: ST. GEORGE UT 84790

Title SECRETARY, COO
Name LUNT, JACOB D.
Address 1185 W 2180 N
City-State-Zip: PLEASANT GROVE UT 84062

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: JOHN BARTHOLOMEW**CHIEF FINANCIAL
OFFICER****01/19/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date