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NONPROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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•	HELPLINE, INC.				(
Principal Place	e of Business	Mailing Address						
142-B WHITAKER RD. LUTZ FL 33549		PO BOX 9565 TAMPA FL 33674-9565						
					3. Date Incorporated or Qualified 03/13/1979		of Last R	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number		· · · · · · · · · · · · · · · · · · ·	polled For
21		26			59-1872854			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27			5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State	е	City & State			6. Election Campaign Financing		\$5.00	May Be
23]		[28]			Trust Fund Contribution		Added t	
Zip	Country	Zip	Coun	itry	8. This corporation has liability for			199.032,
24	25 9. Name and Address of Curr	29 29 Agent	[30]		Florida Statutes 10. Name and Address of New R	Yes U		
			1	B1 Name	IV. NEITH STILL AUGUST OF HEAT F	ragistatati Ağ	Join	
CIMINO, FRANK JR			<u> </u>	6 0	(20.0			
18523 CROOKED LN. LUTZ FL 33449			ľ	Street Add	ress (P.O. Box Number is Not Accepta	able)		
			[7	33				
			l _a	34 City			85 Zip (Code
				, ,		FL		
44 5	100	1012 1500 51 11 0						
11. Pursuant to	to the provisions of Sections 617.05 egistered agent, of John, in the sta	62 and 617.1508, Florida Stat te of Florida. Such change was	utes, the abo	ove-named corp by the corpora	poration submits this statement for the tion's board of directors. I hereby acce	purpose of cl	hanging its	s registered
11. Pursuant to office or reagent. Lar	to the provisions of Sections 617.05 egistered agent, of out, in the sta m familiar with, and accept the obli	22 and 617.1508, Florida Stat te of Florida. Such change was igations of, Section 617.0503, I	utes, the abo s authorized Florida Statu	ove-named corpora by the corpora tes.	poration submits this statement for the tion's board of directors. I hereby acce	purpose of clept the appoin	hanging its	s registered registered
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SIGNATURE _	Signature posses a propud name registered a	PRHAX CIMINOS	6		ired when reinstating)	purpose of clept the appoint	10/	196
SIGNATURE _	Signature posses a propud name registered a	GAN CIMINUS agent and title if applicable. (N	TE: Registered	Agent signature requi		purpose of clept the appoint	10/	94 S IN 12
SIGNATURE	Signature, speed approved name of registered a	AGUN CAMINUS agent and little if applicable. (No IND DIRECTORS	DTE: Registered a	Agent signature requi	ired when reinstating)	purpose of clept the appoint	/ 16/ DIRECTOR	94 S IN 12
SIGNATURE _ 12. TITLE NAME	Signature Proces Opposed name Pregistered a OFFICERS A ED CIMINO, FRANK SR 18523 CROOKED LN.	AGUN CAMINUS agent and little if applicable. (No IND DIRECTORS	13. 1.1 TITL 1.2 NAM	Agent signature requi	ired when reinstating)	purpose of clept the appoint	/ 16/ DIRECTOR	94 S IN 12
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SIGNATURE	Signature / specific proposition are projected a OFICERS A CIMINO, FRANK SR 18523 CROOKED LN. LUTZ FL 33549	AGUN CAMINUS agent and little if applicable. (No IND DIRECTORS	13. 1.1 TITL 1.2 NAN 1.3 STR	Agent signature requi E HE EET ADDRESS (-ST-ZIP	ired when reinstating)	purpose of clept the appoint	/ 16/ DIRECTOR	S IN 12
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