

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2001 8:00 am
Secretary of State

09-10-2001 90062 041 ****70.00

0006826

DOCUMENT # 762832

1. Entity Name

HELPLINE, INCORPORATED

Principal Place of Business

Mailing Address

812 SOUTHARD ST
 UNIT 1
 KEY WEST FL 33040
 US

HELPLINE, INC.
 POST OFFICE BOX 2186
 KEY WEST FL 33045
 US

2. Principal Place of Business

3. Mailing Address

1623 Spaulding Ct. # 1

Suite, Apt. #, etc

Suite, Apt. #, etc.

Suite 1

City & State
 Key West, FL

City & State

Zip

Country
 MONROE

Zip

Country

4. FEI Number 59-2176319

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERNANDEZ, LOU
 1505 LAIRD STREET
 KEY WEST FL 33040

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
 After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D. Delete

NAME SLATON, T
 STREET ADDRESS 515 WHITEHEAD ST
 CITY-ST-ZIP KEY WEST FL 33046

TITLE Change Addition

NAME VP Le Grays, Sophie
 STREET ADDRESS 3635 Seaside Dr. #116
 CITY-ST-ZIP Key West, FL 33040

TITLE P. Delete

NAME HOTCHKISS, WESS
 STREET ADDRESS 1901 SO ROOSEVELT STE 408N
 CITY-ST-ZIP KEY WEST FL 33040

TITLE Change Addition

NAME S KRIENEN, Anneke
 STREET ADDRESS 22927 DRAKE LN.
 CITY-ST-ZIP Summerland Key, FL 33042

TITLE Delete

NAME T ESQUINALDO, P J
 STREET ADDRESS 1329 2ND ST
 CITY-ST-ZIP KEY WEST FL 33040

TITLE Change Addition

NAME D FURMAN, Karen
 STREET ADDRESS 3990 S. Roosevelt Blvd.
 CITY-ST-ZIP Key West, FL 33040

TITLE Delete

NAME D HAWTHORNE, WILLIAM
 STREET ADDRESS 1400 VON PHISTER ST
 CITY-ST-ZIP KEY WEST FL 33040

TITLE Change Addition

NAME D Lenington, Roy
 STREET ADDRESS 2305 PATTERSON
 CITY-ST-ZIP Key West, FL 33040

TITLE Delete

NAME D RYSMAN, L
 STREET ADDRESS 62 FRONT ST
 CITY-ST-ZIP KEY WEST FL 33040

TITLE Change Addition

NAME D COVAN, FRED
 STREET ADDRESS 1809 Seindenburg
 CITY-ST-ZIP Key West, FL 33040

TITLE Delete

NAME S LISTER, SARA
 STREET ADDRESS 1126 VAN PHIRTER
 CITY-ST-ZIP KEY WEST FL 33040

TITLE Change Addition

NAME D GRANT, VICKI
 STREET ADDRESS 78 Key Haven Rd
 CITY-ST-ZIP Key West, FL 33040

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE: *[Handwritten Signature]*

9/4/01

(305) 292-8445

CR2E037 (5/01)