

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764029

FILED
Apr 30, 2009
Secretary of State

Entity Name: FARMWORKERS SELF-HELP, INC.

Current Principal Place of Business:

37240 LOCK STREET
DADE CITY, FL 33523 US

New Principal Place of Business:

Current Mailing Address:

37240 LOCK STREET
DADE CITY, FL 33523 US

New Mailing Address:

FEI Number: 59-2382744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMO, MARGARITA
37240 LOCK ST.
DADE CITY, FL 33523 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSALES, FRANCISCO
Address: P. O. BOX 444 N/A
City-St-Zip: SAN ANTONIO, FL 33576

Title: S () Delete
Name: MEDRANO, ADELA
Address: 1108 N. 17TH ST.
City-St-Zip: DADE CITY, FL 33523

Title: VP () Delete
Name: CAPETILLO, MARIA ANTONIO
Address: 15033 HARDEE AVE
City-St-Zip: DADE CITY, FL 33523

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIMMONS, GUILLIERMINA
Address: 4500 BIRDSONG BLVD.
City-St-Zip: LUTZ, FL 33559 US

Title: VP (X) Change () Addition
Name: AMATECO, JOSE
Address: 37121 LOCK STREET
City-St-Zip: DADE CITY, FL 33523 US

Title: S (X) Change () Addition
Name: GARCIA, ROSA
Address: 13239 BULL ROAD
City-St-Zip: DADE CITY, FL 33525 US

Title: T () Change (X) Addition
Name: GONZALEZ, JUANITA
Address: 13914 1ST STREET
City-St-Zip: DADE CITY, FL 33523 US

Title: O () Change (X) Addition
Name: HERAVI, MEHRAN
Address: 37243 LOCK STREET
City-St-Zip: DADE CITY, FL 33523 US

Title: O () Change (X) Addition
Name: BEARDEN, EVELINA
Address: 1514 1/2 S. SCHILLER STREET
City-St-Zip: LITTLE ROCK, AR 72202 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSE AMATECO

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date