

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768234

FILED
Apr 08, 2009
Secretary of State

Entity Name: HELP BECOMES HOPE, INC.

Current Principal Place of Business:

933 45TH STREET
WEST PALM BEACH, FL 334072374

New Principal Place of Business:

Current Mailing Address:

933 45TH STREET
WEST PALM BEACH, FL 334072374

New Mailing Address:

FEI Number: 59-2347305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRANTZ, BARBARA A
HANLEY CENTER, INC
933 45TH STREET
WEST PALM BEACH, FL 33407 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: TD () Delete
Name: MYERS, JAMES L JR.
Address: 1249 BREAKERS WEST BLVD.
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete
Name: CARP, MICHAEL T.
Address: 1495 FOREST HILL BLVD, SUITE A
City-St-Zip: W PALM BCH, FL 33406

Title: D () Delete
Name: HANLEY, MARY JANE
Address: 600 ST ANNE'S LN
City-St-Zip: VERO BCH, FL 32967

Title: D () Delete
Name: HANLEY, JOHN W SR
Address: 600 ST ANNE'S LN
City-St-Zip: VERO BCH, FL 32967

Title: CD () Delete
Name: KEENAN, MICHAEL
Address: 1532 OLD OKEECHOBEE RD., SUITE 103
City-St-Zip: WEST PALM BEACH, FL 33411

Title: CD () Delete
Name: HANLEY, MICHAEL J
Address: 3280 NORTHSIDE PARKWAY, NW, APT. 113
City-St-Zip: ATLANTA, GA 30327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BARBARA A. KRANTZ

CEO

04/08/2009

Electronic Signature of Signing Officer or Director

Date