

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 30, 2003 8:00 am
Secretary of State

06-30-2003 90068 031 ****70.00

DOCUMENT # N00000005199

1. Entity Name

L.O.G. HELPING HANDS, INCORPORATED



Principal Place of Business

**2740 BAYSHORE DR. STE 8AND 9
NAPLES FL 34112**

Mailing Address

**2740 BAYSHORE DR. STE 8AND 9
NAPLES FL 34112**

2. Principal Place of Business

6400 Dudley Drive

3. Mailing Address

P.O. Box 11537

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Naples, FL

Zip

34105

Country

USA

Zip

34101

Country

USA

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GREEN, JANICE M
5900 WAXMYRTLE WAY
NAPLES FL 34109**

7. Name and Address of New Registered Agent

Name **Janice M. Green**

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

1200 misty Pine Cr.

Apt. 201

City **Naples**

FL

Zip Code

34105-2586

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. I am familiar with, and accept the obligations of registered agent.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **GREEN, JANICE M**
STREET ADDRESS **5900 MAXMYRTLE WAYSTE 8AND 9**
CITY-ST-ZIP **NAPLES FL 34109**

TITLE **V** ☐ Delete
NAME **GREEN, RANDY J**
STREET ADDRESS **5900 MAXMYRTLE WAYSTE 8AND 9**
CITY-ST-ZIP **NAPLES FL 34109**

TITLE **T** ☐ Delete
NAME **JAMES, SHAYVONNE**
STREET ADDRESS **5400 CORONADO PKWY #C**
CITY-ST-ZIP **NAPLES FL 34116**

TITLE **T** ☐ Delete
NAME **CHOKA, DERICK**
STREET ADDRESS **5341 SUMMERWIND DRIVE 103**
CITY-ST-ZIP **NAPLES FL 34109**

TITLE **S** ☐ Delete
NAME **RILEY, RILEY**
STREET ADDRESS **4420 BAYSHORE #204**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **T** ☐ Delete
NAME **KNAGGS, WEBERT**
STREET ADDRESS **2930 22 AVE NE**
CITY-ST-ZIP **NAPLES FL 34120**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Janice M. Green** 4-10-03 239 436-3778

CR2E037 (10/02)

Attachment #

90140420

May 18, 2003

N000000065199

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom it may Concern:

This letter is to acknowledge that my UBR report is late. I am aware of the time period you allowed to get it in on time. However, I lost the original report and then I was unable to get a new one. I did not have long distance on my phone and did not have access to my computer.

Please accept my report at this time. I have never been late since it has been initiated. I certainly do apologize and hope you will reconsider and allow me to file my report.

By the way this is my original report, as you said was able to find it.

Thank You
Janice M. Green, Registered Agent