

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007126

FILED
Jan 31, 2012
Secretary of State

Entity Name: VETERANS HELPING HANDS, INC.

Current Principal Place of Business:

7868 MARX DR
NORTH FT. MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

P.O BOX 3158
N. FORT MYERS, FL 33918

New Mailing Address:

FEI Number: 65-1050988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, DALE E
7868 MARX RD
NORTH FT. MYERS, FL 33917 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: PSD
Name: THOMAS, DALE E
Address: 7868 MARX DR.
City-St-Zip: NORTH FT. MYERS, FL 33917

Title: FPD
Name: TANNER, JACK
Address: 5901 PENDRAGON LANE
City-St-Zip: FT. MYERS, FL 33912

Title: VTD
Name: THOMAS, DALE E
Address: P. O. BOX 3710
City-St-Zip: N. FT MYERS, FL 33918

Title: TRS
Name: THOMAS, BETH J
Address: 7868 MARX RD
City-St-Zip: NORTH FT. MYERS, FL 33917

Title: SEC
Name: HOOD, DAWN J
Address: 1112 PATTERSON RD
City-St-Zip: CAPE CORAL, FL 33933

Title: DVP
Name: FREER, DONALD L
Address: 1209 NORTH TAMIAMI TR.#206
City-St-Zip: NORTH FT. MYERS, FL 33903

I hereby 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 all other like empowered.

SIGNATURE: BETH THOMAS

SC/T

01/31/2012

Electronic Signature of Signing Officer or Director

Date