

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000002208

1. Entity Name
HELPING HANDS EQUIPMENT LENDING LIBRARY FOR
CHILDREN, INC.



Principal Place of Business
1021 LAKELAND HILLSBLVD.
LAKELAND, FL 33805

Mailing Address
4158 BUTTON BUSH CIRCLE
LAKELAND, FL 33811



01312006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3715573

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLANDINO-GAUNT, MARIA
4158 BUTTON BUSH CIRCLE
LAKELAND, FL 33811

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IN THIS SPACE**

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 _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HICIANO, BLANCA
STREET ADDRESS 4158 BUTTON BUSH CIRCLE
CITY-ST-ZIP LAKELAND, FL 33811

TITLE T
NAME BLANDINO-GAUNT, MARIA
STREET ADDRESS 14014 LEMON VALLEY PL
CITY-ST-ZIP TAMPA, FL 33625

TITLE D
NAME VAN BAALEN, RICHARD
STREET ADDRESS 1021 HIGHLAND HILLS BLVD.
CITY-ST-ZIP LAKELAND, FL 33805

TITLE D
NAME PARCHMENT, ALFREDA
STREET ADDRESS 1021 LAKELAND HILLS BLVD.
CITY-ST-ZIP LAKELAND, FL 33805

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1100000508672
04/28/06-80014-003 70.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____

Maria J. Blandino-Gaunt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/06
Date

813-745-6391
Daytime Phone #