

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005498

**FILED**  
**May 04, 2004**  
**Secretary of State****Entity Name:** HELPING HANDS MINISTRIES OF ATLANTIC BEACH INC.**Current Principal Place of Business:**31 LEWIS ST  
ATLANTIC BEACH, FL 32233**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 330379  
ATLANTIC BEACH, FL 32233**New Mailing Address:****FEI Number:** 59-3736675**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**RUMRELL, RICHARD G  
4500 SALISBURY RD, SUITE 340  
JACKSONVILLE, FL 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: PD ( ) Delete  
Name: GUAJARDO, CHRISTINE  
Address: 2437 BLACKBEARD DR.  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VD ( ) Delete  
Name: HART, MISSY  
Address: 13599 OSPREY POINT DR.  
City-St-Zip: JACKSONVILLE, FL 32224

Title: SD ( ) Delete  
Name: LUMMUS, DEBORA  
Address: 645 STAFFORDSHIRE DRIVE EAST  
City-St-Zip: JACKSONVILLE, FL 32225

Title: ED ( ) Delete  
Name: STACKHOUSE, JAMES W  
Address: 9716 ORR CT. S.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: TD ( ) Delete  
Name: WORTHERLY, JOANNE  
Address: 2740 GRAYTON CT.  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete  
Name: LAWSON, KAYE  
Address: 1510 SELVA MARINA DR  
City-St-Zip: ATLANTIC BEACH, FL 32233

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WOESSNER, PAUL  
Address: 1509 LINKSIDE DR.  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D (X) Change ( ) Addition  
Name: HART, MISSY  
Address: 13599 OSPREY POINT DR.  
City-St-Zip: JACKSONVILLE, FL 32224

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: VD (X) Change ( ) Addition  
Name: LAWSON, KAYE  
Address: 1510 SELVA MARINA DR  
City-St-Zip: ATLANTIC BEACH, FL 32233

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES W. STACKHOUSE

ED

05/04/2004

Electronic Signature of Signing Officer or Director

Date

CINDY PIZZARO  
31 LEWIS STREET  
ATLANTIC BEACH, FL. 32233

BONNIE H. BOOTHE  
1047 WILDERLAND DR.  
JACKSONVILLE, FL. 32225

MICHAEL ELEM  
12363 N. BRIGHTON BAY TRAIL  
JACKSONVILLE, FL. 32246