

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000132

FILED
Apr 14, 2003
Secretary of State

Entity Name: HAND-IN-HAND MINISTRIES, INC.

Current Principal Place of Business:

15143 118TH TR. N.
JUPITER, FLORIDA, 33478

New Principal Place of Business:

15143 118TH TR. N.
JUPITER, FL 33478

Current Mailing Address:

15143 118TH TR. N.
JUPITER, FLORIDA, 33478

New Mailing Address:

15143 118TH TR. N.
JUPITER, FL 33478

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, CHAR
15143 118TH TR. N.
JUPITER, FLORIDA, FL 33478

Name and Address of New Registered Agent:

ANDERSON, CHAR
15143 118TH TR. N.
JUPITER, FL 33478

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:

04/14/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT () Change (X) Addition
Name: ANDERSON, SHELBY
Address: 15143 118 TR. N.
City-St-Zip: JUPITER, FL 33478

Title: D () Change (X) Addition
Name: ANDERSON, CHARLENE
Address: 15143 118 TR. N.
City-St-Zip: JUPITER, FL 33478

Title: DS () Change (X) Addition
Name: ANDERSON, RICK
Address: 15143 118 TR. N.
City-St-Zip: JUPITER,, FL 33478

Title: DT () Change (X) Addition
Name: ANDERSON, CORTNEY
Address: 15143 118 TR. N.
City-St-Zip: JUPITER, FL 33478

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: CHARLENE ANDERSON

D

04/14/2003

Electronic Signature of Signing Officer or Director

Date