

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002769

FILED
Apr 28, 2011
Secretary of State

Entity Name: HELPING HANDS COMMUNITY RESOURCE DISTRIBUTION CENTER, INC.

Current Principal Place of Business:

14310 N.W. 16TH COURT
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

14310 N.W. 16TH COURT
MIAMI, FL 33167

New Mailing Address:

FEI Number: 41-2126406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEATON-PARRISH, DEMETRES L
14310 N.W. 16TH COURT
MIAMI, FL 33167 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
Name: KEATON-PARRISH, DEMETRES L
Address: 14310 N.W. 16TH CT.
City-St-Zip: MIAMI, FL 33167

Title: SD
Name: GLASPER, ALFRENECE L
Address: 2156 N.W. 47 TERRACE
City-St-Zip: MIAMI, FL 33142

Title: TD
Name: JACKSON, JOANNE W
Address: 561 N.E. 171ST STREET
City-St-Zip: MIAMI, FL 33169

Title: VPD
Name: JACKSON, ARCHIE L
Address: 561 N.E 171 ST
City-St-Zip: MIAMI, FL 33169

Title: COC
Name: MCCLENNEY, ADRIAN R
Address: 2525 N.W 156ST
City-St-Zip: MIAMI GARDES, FL 33056

Title: ECC
Name: JOHNSON, TOMEKA S
Address: 1885 N.E 157ST
City-St-Zip: MIAMI GARDENS, FL 33056

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: DEMETRES L KEATON-PARRISH

PD

04/28/2011

Electronic Signature of Signing Officer or Director

Date