

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005618

FILED
Apr 29, 2008
Secretary of State

Entity Name: HANKIES FOR HUMANITY, INC.

Current Principal Place of Business:

932 E SHADOWLAWN AVENUE
TAMPA, FL 33603

New Principal Place of Business:

502 S FREMONT AVE
APT 1206
TAMPA, FL 33606

Current Mailing Address:

932 E SHADOWLAWN AVENUE
TAMPA, FL 33603

New Mailing Address:

PO BOX 320655
TAMPA, FL 33679

FEI Number: 20-0088694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, KEVIN L
932 E SHADOWLAWN AVENUE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

HAMLET, KEVIN L
502 S FREMONT AVE
APT 1206
TAMPA, FL 33606 US

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: KEVIN L HAMLET

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: TURNER, KEVIN L
Address: 932 E SHADOWLAWN AVENUE
City-St-Zip: TAMPA, FL 33603

Title: SD () Delete
Name: HAMLET, STEPHEN B III
Address: 932 E SHADOWLAWN AVENUE
City-St-Zip: TAMPA, FL 33603

Title: TD () Delete
Name: GARCIA, EDUARDO DR.
Address: 4241 HENDERSON BLVD
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: HAMLET, KEVIN L
Address: 502 S FREMONT AVE, APT 1206
City-St-Zip: TAMPA, FL 33606

Title: SD (X) Change () Addition
Name: HAMLET, STEPHEN B III
Address: 502 S FREMONT AVE, APT 1206
City-St-Zip: TAMPA, FL 33606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KEVIN L HAMLET

CD

04/29/2008

Electronic Signature of Signing Officer or Director

Date