

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006314

FILED
May 21, 2007
Secretary of State

Entity Name: MOMS HELP ORGANIZATION, INC.

Current Principal Place of Business:

P.O. BOX 935004
COCONUT CREEK, FL 33093 US

New Principal Place of Business:

1515 UNIVERSITY DR. SUITE #101-B
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

P.O. BOX 935004
COCONUT CREEK, FL 33093 US

New Mailing Address:

1515 UNIVERSITY DR SUITE #101-B
CORAL SPRINGS, FL 33071 US

FEI Number: 26-0067449 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ETHRIDGE, STACEY F
4848 NW 20TH PL
COCONUT CREEK, FL 33063 US

Name and Address of New Registered Agent:

ETHRIDGE, STACEY F
1515 UNIVERSITY DR SUITE #101-B
CORAL SPRINGS, FL 33071 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: STACEY ETHRIDGE

05/21/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ETHRIDGE, STACEY F
Address: 4848 NW 20TH PL
City-St-Zip: COCONUT CREEK, FL 33063

Title: VP () Delete
Name: ETHRIDGE, GREGORY L
Address: 4848 NW 20TH PL
City-St-Zip: COCONUT CREEK, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: STACEY ETHRIDGE

P

05/21/2007

Electronic Signature of Signing Officer or Director

Date