

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006720

FILED
Mar 08, 2009
Secretary of State

Entity Name: HAND OF HOPE OUTREACH INTERNATIONAL, INC.

Current Principal Place of Business:

14375 MYER LAKE CIRCLE
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 340
OZONA, FL 34660

New Mailing Address:

FEI Number: 75-3126014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINSETT, F.S.
14375 MYER LAKE CIRCLE
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

WINSETT, F.S. PRES
14375 MYER LAKE CIRCLE
CLEARWATER, FL 33760 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: F.S. WINSETT

03/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WINSETT, F.S. B
Address: 14375 MYER LAKE CIRCLE
City-St-Zip: CLEARWATER, FL 33760

Title: D () Delete
Name: JAMES, RUSSELL
Address: 214 JARVIS RD
City-St-Zip: CHESAPEAKE, VA 23323

Title: D () Delete
Name: D'ANDREA, BOB
Address: 9622 142ND AVE N
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: WEST, JAMES
Address: 6668 RIVER RD.
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WINSETT, F.S. PRES.
Address: 14375 MYER LAKE CIRCLE
City-St-Zip: CLEARWATER, FL 33760

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

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: F.S. WINSETT

PRES

03/08/2009

Electronic Signature of Signing Officer or Director

Date