

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000007818

FILED
Sep 28, 2006
Secretary of State

Entity Name: HELPING HAND WORLDWIDE, INC.

Current Principal Place of Business:

109 HARBORVIEW DR.
LARGO, FL 33770

New Principal Place of Business:

2454 SHARKEY ROAD
APT # 103
CLEARWATER, FL 33765

Current Mailing Address:

109 HARBORVIEW DR.
LARGO, FL 33770

New Mailing Address:

2454 SHARKEY ROAD
APT # 103
CLEARWATER, FL 33765

FEI Number: 05-0586154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ROSATI, JAMES
109 HARBOR VIEW DR.
LARGO, FL 33771 US

Name and Address of New Registered Agent:

SEDWICK, MICHAEL H
2454 SHARKEY ROAD
APT # 103
CLEARWATER, FL 33765 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: MICHAEL H. SEDWICK

09/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SEDWICK, MICHAEL H
Address: 109 HARBORVIEW DR.
City-St-Zip: LARGO, FL 33770

Title: SECT () Delete
Name: SEDWICK, MICHAEL H
Address: 109 HARBORVIEW DR.
City-St-Zip: LARGO, FL 33770

Title: TREA () Delete
Name: SEDWICK, MICHAEL H
Address: 109 HARBORVIEW DR.
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SEDWICK, MICHAEL H PRES
Address: 2454 SHARKEY ROAD , APT. # 103
City-St-Zip: CLEARWATER, FL 33765

Title: SECT (X) Change () Addition
Name: SEDWICK, MICHAEL H SECT
Address: 2454 SHARKEY ROAD , APT. # 103
City-St-Zip: CLEARWATER, FL 33765

Title: TREA (X) Change () Addition
Name: SEDWICK, MICHAEL H TREA
Address: 2454 SHARKEY ROAD, APT. # 103
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL H. SEDWICK

PRES

09/28/2006

Electronic Signature of Signing Officer or Director

Date