

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008909

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** HODORI HELPING HANDS, INC.

**Current Principal Place of Business:**

390 BRIGHTWATER DR. SE  
PALM BAY, FL 32909 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX #121345  
WEST MELBOURNE, FL 32912 US

**New Mailing Address:**

FEI Number: 81-0630982      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRUNNER, LAURA  
390 BRIGHTWATER DR. SE  
PALM BAY, FL 32909 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: P/T  
Name: BRUNNER, LAURA  
Address: 390 BRIGHTWATER DR SE  
City-St-Zip: PALM BAY, FL 32909 US

Title: V  
Name: BRUNNER, GERARD  
Address: 390 BRIGHTWATER DR SE  
City-St-Zip: PALM BAY, FL 32909 US

Title: S  
Name: BRUNNER, LAURA  
Address: 390 BRIGHTWATER DR. SE  
City-St-Zip: PALM BAY, FL 32909 US

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: LAURA BRUNNER

S

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date