

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000009315

FILED
Dec 03, 2008
Secretary of State

Entity Name: HEARTS HELPING HANDS, INC.

Current Principal Place of Business:

1130 SIXTH ST S
NAPLES, FL 34102

New Principal Place of Business:

8889 PELICAN BAY BLVD SUITE #400
C/O CYPRESS CAPITOL GROUP
NAPLES, FL 34108

Current Mailing Address:

1130 SIXTH ST S
NAPLES, FL 34102

New Mailing Address:

8889 PELICAN BAY BLVD SUITE #400
C/O CYPRESS CAPITOL GROUP
NAPLES, FL 34108

FEI Number: 51-0488210 **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:

KNOWLES, PETER A
1130 SIXTH ST S
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

KNOWLES, KEVIN
8889 PELICAN BAY BLVD, SUITE #400
C/O CYPRESS CAPITOL GROUP
NAPLES, FL 34108 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 KNOWLES

12/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: KNOWLES, PETER A
Address: 1130 SIXTH ST S
City-St-Zip: NAPLES, FL 34102

Title: VAS () Delete
Name: KNOWLES, CHRISTINA
Address: 8801 BELLWOOD RD.
City-St-Zip: BETHESDA, MD 20817

Title: V () Delete
Name: BAHEMU, JEROME B DR
Address: 1130 SIXTH ST S
City-St-Zip: NAPLES, FL 34102

Title: S () Delete
Name: WARE, R. TIMMIS ESQ
Address: 286 EIGHTEENTH AVE. S
City-St-Zip: NAPLES, FL 34102

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KNOWLES, KEVIN
Address: CYPRESS CAPITOL #400, 8889 PELICAN BAY BLV
City-St-Zip: NAPLES, FL 34108

Title: VP (X) Change () Addition
Name: KNOWLES, CHRISTINA
Address: 8801 BELLWOOD RD.
City-St-Zip: BETHESDA, MD 20817

Title: VP (X) Change () Addition
Name: HARTWICK, KATE
Address: CYPRESS CAPITOL #400, 8889 PELICAN BAY BLV
City-St-Zip: NAPLES, FL 34108

Title: SEC (X) Change () Addition
Name: WARE, R. TIMMIS ESQ
Address: 286 EIGHTEENTH AVE. S
City-St-Zip: NAPLES, FL 34102

Title: DIR () Change (X) Addition
Name: BECKHORN, DUANE
Address: 4651 GULF SHORE BLVD #1106
City-St-Zip: NAPLES, FL 34103

Title: DIR () Change (X) Addition
Name: MARSHALL, WILLIAM
Address: 155 1ST AVE, SOUTH
City-St-Zip: NAPLES, FL 34102

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 KNOWLES

PRES

12/03/2008

Electronic Signature of Signing Officer or Director

Date