2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009950

FILED Mar 03, 2009 Secretary of State

DOCON	/ILIVI# 140C	000000000000000000000000000000000000000		Secretary of State	
Entity Na	me: HANDS	DN! INC.			
Current P	rincipal Place	of Business:	New Principal Place	of Business:	
	RAL AVENUE RSBURG, FL 3				
Current Mailing Address:			New Mailing Address:		
	RAL AVENUE RSBURG, FL 3				
FEI Number: 52-5127493		FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:	
ST PETER The above	RAL AVENUE RSBURG, FL 3	33701 US	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	nic Signature of Registered Ac	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WOOD, LYN S	Delete AVENUE SUITE 200 RG, FL 33701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CHERRY, LISE 689 CENTRAL	Delete ETH L AVE. SUITE 200 BURG, FL 33701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () CRAIG, MARSH) Delete HALL W	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: LYN S. WOOD DPST 03/03/2009

689 CENTRAL AVENUE SUITE 200

ST PETERSBURG, FL 33701

Address:

City-St-Zip: