

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000946

FILED  
Apr 11, 2007  
Secretary of State

Entity Name: HANDS ON HANDS, INC.

## Current Principal Place of Business:

90B SOMBRERO BEACH RD  
MARATHON, FL 33050

## New Principal Place of Business:

## Current Mailing Address:

C/O GREENMAN & MANZ P.A.  
5800 OVERSEAS HIGHWAY #40  
MARATHON, FL 33050 US

## New Mailing Address:

FEI Number: 35-2225225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRANKLIN D GREENMAN PA  
5800 OVERSEAS HWY STE 40  
MARATHON, FL 33050 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: D ( ) Delete  
Name: GREENMAN, FRANKLIN D  
Address: 90B SOMBRERO BEACH RD  
City-St-Zip: MARATHON, FL 33050

Title: D ( ) Delete  
Name: GREENMAN, JUDY B  
Address: 90B SOMBRERO BEACH RD  
City-St-Zip: MARATHON, FL 33050

Title: D ( ) Delete  
Name: GREENMAN, KELLEY  
Address: 90B SOMBRERO BEACH RD  
City-St-Zip: MARATHON, FL 33050

Title: D ( ) Delete  
Name: GREENMAN, SUSAN  
Address: 90B SOMBRERO BEACH RD  
City-St-Zip: MARATHON, FL 33050

Title: D ( ) Delete  
Name: GREENMAN, KATIE  
Address: 90B SOMBRERO BEACH RD  
City-St-Zip: MARATHON, FL 33050

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: KATIE GREENMAN

PRES

04/11/2007

Electronic Signature of Signing Officer or Director

Date