2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

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Entity Name: HELPING HANDS MINISTRIES OF JESUS CHRIST, INC.

Current Principal Place of Business:

4433 VARSITY LAKES DR
LEHIGH ACRES, FL 33971 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 51188
FT MYERS, FL 33994

New Mailing Address:

FEI Number: 75-3153806 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CHESTER, MICHAEL L
4433 VARISETY LAKES DR
LEHIGH ACRES, FL 33971 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: PD ( ) Delete
Name: CHESTER, MICHAEL L
Address: 4433 VARSITY LAKE DR
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: D ( ) Delete
Name: CHESTER, RAQUEL L
Address: 4433 VARSITY LAKE DR
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: D ( ) Delete
Name: CODY, TOMMY
Address: 1340 VERONICA SHOEMAKER BLVD
City-St-Zip: FT MYRES, FL 33916 US

Title: D ( ) Delete
Name: CODY, VERA
Address: 1340 VERONICA SHOEMAKER BLVD
City-St-Zip: FT MYRES, FL 33916 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CHESTER, MICHAEL L
Address: 4433 VARSITY LAKES DR
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: D (X) Change ( ) Addition
Name: CHESTER, RAQUEL L
Address: 4433 VARSITY LAKES DR
City-St-Zip: LEHIGH ACRES, FL 33971 US

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 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 L. CHESTER PD 04/24/2007
Electronic Signature of Signing Officer or Director — Date