

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002827

FILED
Mar 22, 2011
Secretary of State

Entity Name: AMERIPHIL HELPING HANDS, INC.

Current Principal Place of Business:

C/O LEONOR S. BOOKER
704 CRESTWOOD ST.
MARY ESTHER, FL 32569

New Principal Place of Business:

Current Mailing Address:

C/O LEONOR S. BOOKER
704 CRESTWOOD ST.
MARY ESTHER, FL 32569

New Mailing Address:

FEI Number: 20-0883817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOOKER, LEONOR S
704 CRESTWOOD ST.
MARY ESTHER, FL 32569 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
Name: HOBIN, HELEN
Address: 2047 BAYOU DR.
City-St-Zip: NAVARRE, FL 32566

Title: VP
Name: BECKER, JOSEFA
Address: 205 THIRD ST.
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: S
Name: STEBRIDGE, MARIA ELENA
Address: 1650 HWY. 98W APT. 209
City-St-Zip: MARY ESTHER, FL 32569

Title: T
Name: BARNES, SALVACION
Address: 491 SANDYRIDGE CR.
City-St-Zip: MERY ESTHER, FL 32569

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: LEONOR S. BOOKER

R.A

03/22/2011

Electronic Signature of Signing Officer or Director

Date