2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002952

Address:

City-St-Zip:

LUTZ, FL 33559

FILED Sep 12, 2005 Secretary of State

Entity Name: HAND IN HAND ACADEMY, INC. **Current Principal Place of Business: New Principal Place of Business:** 19215 LIVINGSTON AVE LUTZ, FL 33559 **Current Mailing Address: New Mailing Address:** 19215 LIVINGSTON AVE LUTZ, FL 33559 FEI Number: 02-0718892 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: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22 ST 4 FLR MIAMI, FL 33145 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DPST () Change () Addition () Delete VILES, WENDY Name: Name: Address: 19215 LIVINGSTON AVE Address: City-St-Zip: LUTZ, FL 33559 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BOLDUC, PENNY Name: Address: 19215 LIVINGSTON AVE Address: City-St-Zip: LUTZ, FL 33559 City-St-Zip: Title: () Delete Title: (X) Change () Addition LARSEN, CHERYL ANKER, AIMEE Name: Name: 19215 LIVINGSTON AVE 19215 LIVINGSTON AVE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:

LUTZ. FL 33559

SIGNATURE: WENDY VILES **PRES** 09/12/2005