

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011098

FILED
Jun 13, 2006
Secretary of State

Entity Name: HELPING HANDS OUTREACH MINISTRIES OF FLORIDA, INC.

Current Principal Place of Business:

530 NORTH EAST WALDO ROAD
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

530 NORTH EAST WALDO ROAD
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: 34-2025544 **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:

GREEN, JOHN S
4843 NW 79TH ROAD
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

GREEN, JOHN S
11818 NW 71ST TER
#148 TURKEY CREEK
GAINESVILLE, FL 32615 US

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: _____

06/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: GREEN, JOHN S
Address: 4843 NW 79TH ROAD
City-St-Zip: GAINESVILLE, FL 32653

Title: VCS () Delete
Name: BOYKIN, TAWANNA
Address: 7011 SW 17TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: T () Delete
Name: PAYNE, VALORY
Address: 2130 NW 31ST AVE K-3
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: WILLIAMS, JOSEPH L
Address: 26 SE 9TH STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: T () Delete
Name: JONES, EVETTE
Address: 4620 NW 41ST PLACE
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: GREEN, JOHN S
Address: 11818 NW 71ST TER
City-St-Zip: GAINESVILLE, FL 32615

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

Title: T (X) Change () Addition
Name: LISA, GODBOLT
Address: 3333 NW 6TH ST
City-St-Zip: GAINESVILLE, FL 32609

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: JOHN S. GREEN

PC

06/13/2006

Electronic Signature of Signing Officer or Director

Date