2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008705

FILED Apr 23, 2012 Secretary of State

Entity Name: HILLSBOROUGH EMERGENCY LONG TERM RECOVERY (HELP), INC.

Current Principal Place of Business: New Principal Place of Business:

5201 W KENNEDY BLVD 3627 A WEST WATERS AVENUE

600 TAMPA, FL 33614

TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

5201 W KENNEDY BLVD 3627 A WEST WATERS AVENUE

SUITE 600 TAMPA, FL 33614 TAMPA, FL 33609

FEI Number: 20-3348539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

UNITED WAY OF TAMPA BAY, INC.

5201 W KENNEDY BLVD,

SUITE 600

LUTHERAN SERVICES FLORIDA, INC.

3627 A WEST WATERS AVENUE

TAMPA FL 33614 US

SUITE 600 TAMPA,, FL 33614 US TAMPA,, FL 33609 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: DAVID YARBOROUGH 04/23/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: MANDELL, LINDA MS
Address: 8834 ALAFIA COVE DRIVE.
City-St-Zip: RIVERVIEW, FL 33569 US

Title: VP

Name: YARBOROUGH, DAVID MR Address: 3627 A WEST WATERS AVENUE

City-St-Zip: TAMPA, FL 33614 US

Title: S

Name: MYERS, KATHY MS Address: 2002 NORTH FLORIDA City-St-Zip: TAMPA, FL 33602 US

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: DAVID YARBOROUGH VP 04/23/2012