

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010579

FILED
Apr 30, 2006
Secretary of State

Entity Name: GIVING HANDS FOUNDATION, INC.

Current Principal Place of Business:

4119 SW 24 STREET #3
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

4119 SW 24 STREET #3
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: 20-3449571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, SHERMON
4119 SW 24 STREET #3
HOLLYWOOD, FL 33023 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: DP () Delete
Name: HUNTER, SHERMON
Address: 4119 SW 24 STREET #3
City-St-Zip: HOLLYWOOD, FL 33023

Title: DVP () Delete
Name: ARAUZ, JEFFREY
Address: 9271 NEPTUNE DRIVE
City-St-Zip: MIAMI, FL 33189

Title: DST () Delete
Name: WRIGHT, STEPHINE
Address: 3996 BROAD LEAF WALK
City-St-Zip: ELLEN WOOD, GA 30294

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SHERMON HUNTER

PRES

04/30/2006

Electronic Signature of Signing Officer or Director

Date