## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000011071

Address:

City-St-Zip:

SARASOTA, FL 34233

Apr 11, 2009 Secretary of State

Entity Name: HELP IN MOTION, INC. **Current Principal Place of Business: New Principal Place of Business:** 5278 VISIONARY COURT SARASOTA, FL 34233 **Current Mailing Address: New Mailing Address:** PO BOX 17541 SARASOTA, FL 34276 FEI Number: 11-3730287 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: MCKEE, ALAN S 5278 VIŚIONARY COURT SARASOTA, FL 34233 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: () Change () Addition () Delete MCKEE, ALAN S Name: Name: Address: 5278 VISIONARY COURT Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MCKEE, DONNA Name: Address: 5278 VISSIONARY COURT Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition PEOPLES, WILLIAM J Name: CAMINITI, RON Name: 5753 SANDY POINTE DRIVE 375 GRAY RD

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

ENGLEWOOD, FL 34223

SIGNATURE: ALAN MCKEE **PRES** 04/11/2009