

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007451

FILED
Jan 16, 2007
Secretary of State

Entity Name: A FRIEND'S HELPING HAND, INC.

Current Principal Place of Business:

1752 APEX RD, UNIT D
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 51449
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 20-5763865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KENNEL, ANNAMARY
1010 MCINTOSH ROAD
SARASOTA, FL 34232 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: D () Delete
Name: KENNEL, ANNAMARY
Address: 1010 MCINTOSH ROAD
City-St-Zip: SARASOTA, FL 33432

Title: D () Delete
Name: KENNEL, JOHN
Address: 1010 MCINTOSH ROAD
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: KENNEL, CASSANDRA
Address: 1010 MCINTOSH ROAD
City-St-Zip: SARASOTA, FL 34232

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: ANNAMARY KENNEL

D

01/16/2007

Electronic Signature of Signing Officer or Director

Date