

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009235

FILED
May 02, 2007
Secretary of State

Entity Name: HUMANITY ASSISTANCE NON-PROFIT INCORPORATED FLORIDA

Current Principal Place of Business:

924 WEST PENSACOLA STREET
#B5
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

PO BOX 1369
TALLAHASSEE, FL 323021369

New Mailing Address:

FEI Number: 03-0603825 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

RAUF, NAIM ADBUR
924 W PENSACOLA STREET
#B5
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

ABDUR RAUF, NAIM M
924 W PENSACOLA STREET
#B5
TALLAHASSEE, FL 32304 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: NAIM M ABDUR RAUF

05/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RAUF, NAIM ABDUR
Address: 924 W PENSACOLA STREET #B5
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete
Name: HABEEB O. ELIMIMIAN, MUHAMMED
Address: 2392 SANDPIPER STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: RAHIMI, JOHNATHAN
Address: 924 W PENSACOLA STREET #B5
City-St-Zip: TALLAHASSEE, FL 32304

Title: D (X) Delete
Name: SELBY, DANIEL D CFO
Address: PO BOX 488
City-St-Zip: TALLAHASSEE, FL 323030488

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ABDUR RAUF, NAIM M
Address: 924 W PENSACOLA STREET #B5
City-St-Zip: TALLAHASSEE, FL 32304

Title: D (X) Change () Addition
Name: REGINALD, GRIFFIN
Address: 4988 BRANDED OAKS COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: D (X) Change () Addition
Name: RAHIMI, JOHNATHAN
Address: 924 W PENSACOLA STREET #B3
City-St-Zip: TALLAHASSEE, FL 32304

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

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.

SIGNATURE: NAIM M ABDUR RAUF

D

05/02/2007

Electronic Signature of Signing Officer or Director

Date