2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008
Secretary of State

DOCUMENT# N06000010941

Entity Name: HELPING OTHERS PURSUE EXCELLENCE, INC.

Current Principal Place of Business:

390 NW 15 ST.
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

390 NW 15 ST.
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, ANTHONY
101 SE 6TH AVE., UNIT 16
POMPANO BEACH, FL 33060 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: CAMPBELL, ANTHONY
Address: 101 SE 6TH AVE., UNIT 16
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete
Name: COLEY, JOHNNY
Address: 1730 NW 5 AVE.
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete
Name: HAYES, ALBERT
Address: 1350 SW 10 TERR.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D ( ) Delete
Name: KING, SHAUN
Address: 4042 NW EASTRIDGE CIR.
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete
Name: RUSH, SYLVESTER SR.
Address: 3804 NW 43 TERR.
City-St-Zip: COCONUT CREEK, FL 33063

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:

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 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: ANTHONY CAMPBELL D 03/26/2008
Electronic Signature of Signing Officer or Director — Date