

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 05, 2011
Secretary of State

Entity Name: IMMOKALEE HELPING OUR PEOPLE IN EMERGENCIES, INC.

Current Principal Place of Business:

708 NO. 11TH STREET
IMMOKALEE, FL 34142

New Principal Place of Business:

1411 LAKE TRAFFORD ROAD
IMMOKALEE, FL 34142

Current Mailing Address:

P.O. BOX 777
IMMOKALEE, FL 34143

New Mailing Address:

FEI Number: 20-5740062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVATORI WOOD, PL
4001 TAMIAMI TRAIL NORTH, SUITE 330
NAPLES, FL 34103 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
Name: HEERS, RICHARD L
Address: 507 N 18TH STREET
City-St-Zip: IMMOKALEE, FL 34142

Title: D
Name: HAMILTON, JULIE
Address: P.O. BOX 777
City-St-Zip: IMMOKALEE, FL 34143

Title: D
Name: SELLE, ROBERT
Address: 25999 OLD 41 ROAD
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: RICE, RICHARD L
Address: 1167 SERENITY WAY
City-St-Zip: IMMOKALEE, FL 34142

I hereby 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 all other like empowered.

SIGNATURE: RICHARD L. HEERS

E.D.

01/05/2011

Electronic Signature of Signing Officer or Director

Date