2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N07000003074

1. Entity Name
HELP THE LEAST OF THESE, INC.



FILED Jan 07, 2008 8:00 am Secretary of State

01-07-2008 90038 019 ****70.00

18091 VIA BELLAMARE LANE 1809		Mailing Address 18091 VIA BELLAMARE L FT MYERS, FL 33913	18091 VIA BELLAMARE LANE					
2. Principal P	lace of Business - No P.O. Box # LN.	3. Mailing Address SAME			a n caw aaw aan aan aan aa a		WEL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01052008 Ch	g-NP CR2E0	37 (12/06)		
City & Stat	e	City & State		4. FEI Number			plied For	
FT, MYERS, FL,		Zip Country		14-199			t Applicable	
339	13 LEE	Ζίρ	Country	5. Certificate of Sta	tus Desired	\$8.75 Add Fee Required	d	
	6. Name and Address of Current R	egistered Agent	Name	7. Name and Addr	ess of New Registered	Agent		
BALLINGER, C. DOUGLAS 18091 VIA BELLAMARE LANE				Street Address (P.O. Box Number is Not Acceptable)				
	S, FL 33913		Olicel Addic					
			City			Zip Code		
			City		FL	<u>- </u>		
	named entity submits this statement for ions of registered agent.	the purpose of changing its re-	gistered office or reg	istered agent, or both, in t	he State of Florida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent ar	ortitle if applicable. (NOTE, R	egistered Agent signature rec	dured when reinstating)	DATE			
Filing Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution.					
	-	·		\$5.00 May Be Added to Fees	Make chec Florida Depa	k payable to rtment of St		
10.	Due by May 1, 2008 OFFICERS AND DIRE	Trust Fund Cor		Added to Fees		rtment of St	ate	
10. IITLE NAME STREET ADDRESS	Due by May 1, 2008 OFFICERS AND DIRE D BALLINGER, JOHN DAVID 1408 PECAN TREES DR	Trust Fund Cor	11. ITLE INAME STREET ADDRESS	Added to Fees	Florida Depa	rtment of St	ate	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. Dauglas Ballingor, (1. DOUGLAS BALLINGER / 5/08 239.415,4102

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR