

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N07000005279

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** HELP FOR THE HOMELESS, INC.

**Current Principal Place of Business:**

211 E. POLK AVE., #1-A  
LAKE WALES, FL 33853

**New Principal Place of Business:**

**Current Mailing Address:**

211 E. POLK AVE., #1-A  
LAKE WALES, FL 33853

**New Mailing Address:**

P.O.BOX 1003  
LAKE WALES, FL 33859

**FEI Number:** 26-0259703

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MONTFORD, JOHN  
211 E. POLK AVE., #1-A  
LAKE WALES, FL 33853 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:** JOHN MONTFORD

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** SEC  
**Name:** DANIELS, DOROTHY  
**Address:** 102 W. BULLARD  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** VICE  
**Name:** DANIELS, LAVON  
**Address:** 102 W. BULLARD  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** D  
**Name:** DANIELS, BRITTANY  
**Address:** 102 W. BULLARD AVE.  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** D  
**Name:** MONTFORD, CANDICE  
**Address:** 211 E. POLK AVE., #1-A  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** D  
**Name:** DANIELS, CIERRA  
**Address:** 102 W. BULLARD AVE.  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** PRES  
**Name:** MONTFORD, JOHN  
**Address:** 211 E. POLK AVE., #1-A  
**City-St-Zip:** LAKE WALES, FL 33853

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:** DOROTHY DANIELS

SEC

04/14/2011

Electronic Signature of Signing Officer or Director

Date