

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 19, 2011**  
**Secretary of State**

DOCUMENT# N07000005279

**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:**102 WEST BULLARD AVENUE  
LAKE WALES, FL 33853**Current Mailing Address:**P.O.BOX 1003  
LAKE WALES, FL 33859**New Mailing Address:****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:**DANIELS, DOROTHY  
102 WEST BULLARD AVENUE  
LAKE WALES, FL 33853 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: DOROTHY DANIELS

10/19/2011

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 US

Title: PRES  
Name: DANIELS, LAVON SR  
Address: 102 W. BULLARD  
City-St-Zip: LAKE WALES, FL 33853 US

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

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

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

10/19/2011

Electronic Signature of Signing Officer or Director

Date