2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N07000008123

Entity Name: THE HELPING HAND MINISTRIES INC.

Current Principal Place of Business:

11620 SW 183 ST
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

11620 SW 183 ST
MIAMI, FL 33157

New Mailing Address:

FEI Number: 80-0163397 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KRIGGER, ERIC
19450 SW 125 AVE
MIAMI, FL 33177 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: DP ( ) Delete
Name: KRIGGER, ERIC
Address: 19450 SW 125 AVE
City-St-Zip: MIAMI, FL 33177

Title: DS ( ) Delete
Name: CRIDER, CALVIN
Address: 11620 SW 183 ST
City-St-Zip: MIAMI, FL 33157

Title: DT ( ) Delete
Name: CRIDER, TAMARA
Address: 11620 SW 183 ST
City-St-Zip: MIAMI, FL 33157

Title: DT ( ) Delete
Name: NOEL, VENLYN E
Address: 12311 SW 259 TERRACE
City-St-Zip: HOMESTEAD,, FL 33032

Title: DS ( ) Delete
Name: SOLOMON, EDDIE L
Address: 10695 SW 172 ST
City-St-Zip: MIAMI, FL 33157

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: TAMARA CRIDER DT 05/04/2009

Electronic Signature of Signing Officer or Director — Date