

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009080

FILED
Jan 04, 2008
Secretary of State

Entity Name: HELPING HANDS TO ANIMALS, INC.

Current Principal Place of Business:

6391 TOULON DRIVE
#41
BOCA RATON, FL 33433 US

New Principal Place of Business:

6391 TOULON DRIVE
BOCA RATON, FL 33433 US

Current Mailing Address:

6391 TOULON DRIVE
#41
BOCA RATON, FL 33433 US

New Mailing Address:

6391 TOULON DRIVE
BOCA RATON, FL 33433 US

FEI Number: 59-2792740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEIMBACH, GINA
1244 S.E. 8TH COURT
DEERFIELD BEACH, FL 33441 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: ROBINSON, JANET
Address: 6391 TOULON DRIVE, #41
City-St-Zip: BOCA RATON, FL 33433 US

Title: DVP () Delete
Name: STEFANIDES, MARGARET
Address: 3700 N.E. 24TH AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: DS () Delete
Name: HEIMBACH, GINA
Address: 1244 S.E. 8TH COURT
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: DT () Delete
Name: SALTZMAN, CHARLES J
Address: 5801 CAMINO DEL SOL #300
City-St-Zip: BOCA RATON, FL 33433 US

Title: D () Delete
Name: PENNEL, KENDRA
Address: 2531 S. OCEAN BLVD. #8
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ROBINSON, JANET
Address: 6391 TOULON DRIVE
City-St-Zip: BOCA RATON, FL 33433 US

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: CHARLES J. SALTZMAN

DT

01/04/2008

Electronic Signature of Signing Officer or Director

Date