

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012153

FILED
Apr 01, 2008
Secretary of State

Entity Name: HELPINGS OF HOPE, INC.

Current Principal Place of Business:

1501 1ST STREET SOUTH
SUITE 601
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

1501 1ST STREET SOUTH
SUITE 601
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 26-1630489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPURIA, ANTHONY J
1501 1ST STREET SOUTH
SUITE 601
JACKSONVILLE BEACH, FL 32250 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: DIR () Delete
Name: SPURIA, ANTHONY J
Address: 1501 1ST STREET SOUTH, SUITE 601
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: P () Delete
Name: SPURIA, KAREN A
Address: 1501 1ST STREET SOUTH, SUITE 601
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP () Delete
Name: SPURIA, DAVID A
Address: 1880 RANDOL MILL AVENUE
City-St-Zip: SOUTHLAKE, TX 76092

Title: DIR () Delete
Name: SPURIA, JOSEPH P
Address: 400 RAY ROAD
City-St-Zip: CHAPEL HILL, NC 27510

Title: DIR () Delete
Name: SIMONE, CARL V
Address: 527 LAKE ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: ANTHONY J SPURIA

DIR

04/01/2008

Electronic Signature of Signing Officer or Director

Date