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**FILED**  
**Mar 11, 1999 8:00 am**  
**Secretary of State**

03-11-1999 90023 040 \*\*\*\*61.25

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N07039**

1. Corporation Name

**HELP THE HUNGRY AT HOME, INC.**

Principal Place of Business

10158 S.E. ACORN WAY  
ATTN: RICHARD H. ANSCHUTZ, HERITAGE OAKS  
TEQUESTA FL 33469

Mailing Address

10158 S.E. ACORN WAY  
ATTN: RICHARD H. ANSCHUTZ, HERITAGE OAKS  
TEQUESTA FL 33469

2 1 3 5 5 4 \*  
213554 - 90023 - 40



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

01/10/1985

4. FEI Number

59-2492261

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

ANSCHUTZ, RICHARD H.  
10158 S.E. ACORN WAY  
TEQUESTA FL 33469

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE  
NAME VAN KESTEREN, JOHN  
STREET ADDRESS 18397 S.E. HERITAGE DR  
CITY-ST-ZIP TEQUESTA FL

TITLE ~~PD~~ VDT ☐ DELETE  
NAME ANSCHUTZ, RICHARD  
STREET ADDRESS 10158 SE ACORN WAY  
CITY-ST-ZIP TEQUESTA FL

TITLE D ☐ DELETE  
NAME FENAUGHTY, RONALD  
STREET ADDRESS 41 GOLFVIEW DRIVE  
CITY-ST-ZIP TEQUESTA FL

TITLE DS ☐ DELETE  
NAME GRELLA, MICHAEL J.  
STREET ADDRESS 8 WEST WINDSOR ROAD  
CITY-ST-ZIP JUPITER FL

TITLE DIRECTOR ☐ DELETE  
NAME JOHN WILKES  
STREET ADDRESS 4420 RIVERPINE COURT  
CITY-ST-ZIP TEQUESTA, FL 33469

TITLE DIRECTOR ☐ DELETE  
NAME PETER NEWSHAM  
STREET ADDRESS 18540 SE HERITAGE DRIVE  
CITY-ST-ZIP TEQUESTA, FL 33469

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE VDT ☒ Change ☐ Addition  
2.2 NAME RICHARD H. ANSCHUTZ  
2.3 STREET ADDRESS 10158 SE ACORN WAY  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE DS ☒ Change ☐ Addition  
4.2 NAME MICHAEL J. GRELLA  
4.3 STREET ADDRESS 8 WEST WINDSOR ROAD  
4.4 CITY-ST-ZIP TEQUESTA, FL 33469

5.1 TITLE DIRECTOR ☐ Change ☒ Addition  
5.2 NAME JOHN WILKES  
5.3 STREET ADDRESS 4420 RIVERPINE COURT  
5.4 CITY-ST-ZIP TEQUESTA, FL 33469

6.1 TITLE DIRECTOR ☐ Change ☒ Addition  
6.2 NAME PETER NEWSHAM  
6.3 STREET ADDRESS 18540 SE HERITAGE DRIVE  
6.4 CITY-ST-ZIP TEQUESTA, FL 33469

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Richard H. Anschutz*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/99 (561)746-5945  
Date Daytime Phone #

CR2E037 (11/98)