

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001441

FILED
Apr 29, 2010
Secretary of State

Entity Name: HELPING RAINBOW, INC.

Current Principal Place of Business:

8710 W HILLSBOROUGH AVE #154
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

PO BOX 91092
LAKELAND, FL 33804

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGOMEZ, ROSE-MARIE
8710 W HILLSBOROUGH AVE #154
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

PORTER, ROSE-MARIE
8710 W HILLSBOROUGH AVE #154
TAMPA, FL 33615 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: ROSE-MARIE PORTER

04/29/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PORTER, ROSE-MARIE
Address: 8710 W HILLSBOROUGH AVE #154
City-St-Zip: TAMPA, FL 33615 US

Title: S
Name: MAXWELL, PATRICIA
Address: 8710 W HILLSBOROUGH AVE STE 154
City-St-Zip: TAMPA, FL 33615 US

Title: VP
Name: AMIN, CHIRAG
Address: 5330 SPRING HILL DR, UNIT E
City-St-Zip: SPRING HILL, FL 34606 US

Title: T
Name: PORTER, BOBBY
Address: 8710 W HILLSBOROUGH AVE, STE 154
City-St-Zip: TAMPA, FL 33615 US

Title: S
Name: CLONTS, GREGORY
Address: 8710 HILLSBOROUGH AVE
City-St-Zip: TAMPA, FL 33615 US

Title: M
Name: GUEVARA, HECTOR E MD
Address: 5346 US HWY 98 N
City-St-Zip: LAKELAND, FL 33809 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: ROSE-MARIE PORTER

P

04/29/2010

Electronic Signature of Signing Officer or Director

Date