

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007124

FILED
Feb 17, 2010
Secretary of State

Entity Name: HELPING HANDS NEIGHBORHOOD NETWORK CENTER, INC.

Current Principal Place of Business:

4000-B ST. JOHN'S AVENUE, SUITE 22
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

4000-B ST. JOHN'S AVENUE, SUITE 22
JACKSONVILLE, FL 32205

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:

CORSE, JOHN D
4000-B ST. JOHN'S AVENUE
SUITE 22
JACKSONVILLE, FL 32205 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
Name: CORSE, JOHN D
Address: 4000-B ST. JOHN'S AVENUE, SUITE 22
City-St-Zip: JACKSONVILLE, FL 32205

Title: D
Name: GRAVES, EDWIN H
Address: 4216 CHIPPEWA DR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: XVP
Name: MILLIGAN, RON
Address: 4000-B ST. JOHN'S AVENUE, SUITE 22
City-St-Zip: JACKSONVILLE, FL 32205

Title: D
Name: HULSEY, MARK
Address: 621 FOREST PARK BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32002

Title: D
Name: ADAMS, WILLIAM H
Address: 10166 VILLAGE GROVE
City-St-Zip: JACKSONVILLE, FL 32257 62

Title: D
Name: HOLMES, ROGERS B
Address: 1560 SANDY SPRINGS DR
City-St-Zip: ORANGE PARK, FL 32003

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: JOHN D CORSE

DP

02/17/2010

Electronic Signature of Signing Officer or Director

Date