

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009526

FILED
May 25, 2009
Secretary of State

Entity Name: SERVING HANDS MINISTRIES, INC.

Current Principal Place of Business:

2427 CHASE AVE STE B
SANFORD, FL 32771

New Principal Place of Business:

4200 BEGONIA COVE
308
SANFORD, FL 32771

Current Mailing Address:

2427 CHASE AVE STE B
SANFORD, FL 32771

New Mailing Address:

4200 BEGONIA COVE
308
SANFORD, FL 32771

FEI Number: 80-0228474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HUNTER, TANISHIA
2427 CHASE AVE STE B
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

HUNTER, TANISHIA
4200 BEGONIA COVE
308
SANFORD, FL 32771 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: TANISHIA HUNTER

05/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: FAISON, QUINTIN
Address: 3272 NIGHT BREEZE LANE
City-St-Zip: LAKE MARY, FL 32746

Title: VC () Delete
Name: IZQUIERDO, SYLVIA D
Address: 680 BROOKFIELD LOOP
City-St-Zip: LAKE MARY, FL 32746

Title: DS () Delete
Name: JONES, JEAN F
Address: 601 EDGEMON AVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: DT () Delete
Name: COOPER, CAROLYN
Address: 1197 GULF STAR DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

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:

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: TANISHIA HUNTER

D

05/25/2009

Electronic Signature of Signing Officer or Director

Date