

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011487

FILED
Apr 21, 2009
Secretary of State

Entity Name: HELP A LITTLE ONE, INC.

Current Principal Place of Business:

255 ALHAMBRA CIRCLE, SUITE 800
CORAL GABLES, FL 33134

New Principal Place of Business:

255 ALHAMBRA CIRCLE
SUITE 800
CORAL GABLES, FL 33134 US

Current Mailing Address:

255 ALHAMBRA CIRCLE, SUITE 800
CORAL GABLES, FL 33134

New Mailing Address:

255 ALHAMBRA CIRCLE
SUITE 800
CORAL GABLES, FL 33134 US

FEI Number: 26-3934575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, SETH Z
255 ALHAMBRA CIRCLE, SUITE 800
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

JOSEPH, SETH Z
255 ALHAMBRA CIRCLE
SUITE 800
CORAL GABLES, FL 33134 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: SETH Z. JOSEPH

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JOSEPH, SETH Z
Address: 255 ALHAMBRA CIRCLE, SUITE 800
City-St-Zip: CORAL GABLES, FL 33134

Title: PT () Delete
Name: STORPER, FRANCES
Address: 9275 SW 152ND STREET, SUITE 108B
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: JOSEPH, BETH
Address: 255 ALHAMBRA CIRCLE, SUITE 800
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JOSEPH, SETH Z
Address: 255 ALHAMBRA CIRCLE, SUITE 800
City-St-Zip: CORAL GABLES, FL 33134 US

Title: PT (X) Change () Addition
Name: STORPER, FRANCES
Address: 9275 SW 152ND STREET, SUITE 108B
City-St-Zip: MIAMI, FL 33157 US

Title: VP (X) Change () Addition
Name: JOSEPH, BETH
Address: 255 ALHAMBRA CIRCLE, SUITE 800
City-St-Zip: CORAL GABLES, FL 33134 US

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: SETH Z. JOSEPH

DP

04/21/2009

Electronic Signature of Signing Officer or Director

Date