

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002026

FILED
Apr 27, 2012
Secretary of State

Entity Name: HELPFUL HANDS, INC.

Current Principal Place of Business:

1190 MACTAVANDASH DRIVE
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 620062
OVIEDO, FL 32762

New Mailing Address:

FEI Number: 80-0430434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERESWILL, REGINA MRS.
1190 MACTAVANDASH DR
OVIEDO, FL 32765 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: VP
Name: TOWNSEND, KATHRYN
Address: 444 TIMBERWOOD TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: P
Name: BERESWILL, REGINA
Address: 1190 MACTAVANDASH DR
City-St-Zip: OVIEDO, FL 32765

Title: VP
Name: GRAGO, CINDY
Address: 395 HILLCREST DR
City-St-Zip: OVIEDO, FL 32765

Title: S
Name: ROBERTA, MCQUEEN
Address: 322 KING ST
City-St-Zip: OVIEDO, FL 32765

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: CATHY MELENDEZ

MS

04/27/2012

Electronic Signature of Signing Officer or Director

Date