

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003504

FILED
Mar 08, 2011
Secretary of State

Entity Name: JOINING HANDS COMMUNITY MISSION, INC.

Current Principal Place of Business:

3214 U. S. HIGHWAY 19
HOLIDAY, FL 34691

New Principal Place of Business:

3214 U. S. HIGHWAY 19 NORTH
HOLIDAY, FL 34691

Current Mailing Address:

3214 U. S. HIGHWAY 19
HOLIDAY, FL 34691

New Mailing Address:

3214 U. S. HIGHWAY 19 NORTH
HOLIDAY, FL 34691

FEI Number: 35-2362473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, DAN A
2657 ST. JOSEPH DR. E.
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

CAMPBELL, DAN A
3214 U. S. HIGHWAY 19 NORTH
HOLIDAY, FL 34691 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: DAN CAMPBELL

03/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: HILDEBRAND, ANNE
Address: 3214 US HWY 19
City-St-Zip: HOLIDAY, FL 34691

Title: D
Name: ANDERSON, KEN
Address: 3214 US HWY 19
City-St-Zip: HOLIDAY, FL 34691

Title: D
Name: DISPARTI, LARRY
Address: 3214 US HWY 19
City-St-Zip: HOLIDAY, FL 34691

Title: D
Name: BROWN, LOIS
Address: 3214 US HWY 19
City-St-Zip: HOLIDAY, FL 34691

Title: T
Name: BERLIN, OTTO
Address: 3214 US HWY 19
City-St-Zip: HOLIDAY, FL 34691

Title: S
Name: BRANDES, MARIA
Address: 3214 US HWY 19
City-St-Zip: HOLIDAY, FL 34691

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: DAN CAMPBELL

CEO

03/08/2011

Electronic Signature of Signing Officer or Director

Date