## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10000010251

Apr 26, 2011 Secretary of State

Entity Name: HELPING HANDS OF WINTER HAVEN, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

34 ODESSA DR

WINTER HAVEN, FL 33880

**Current Mailing Address: New Mailing Address:** 

34 ODESSA DR

WINTER HAVEN, FL 33880

FEI Number: 27-3972050 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DESROCHERS, CHRISTOPHER 2504 AVE G NW WINTER HAVEN, FL 33880

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:**

BONCEK, LOU Name: Address: 34 ODESSA DR

City-St-Zip: WINTER HAVEN, FL 33880

Title: DV Name: MINOR, AL Address: 34 ODESSA DR

City-St-Zip: WINTER HAVEN, FL 33880

Title: SD

PERRY, SHARON Name: Address: 34 ODESSA DR

City-St-Zip: WINTER HAVEN, FL 33880

Title: DP

Name: WOOD, TOM 34 ODESSA DR Address:

City-St-Zip: WINTER HAVEN, FL 33880

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: LOU BONCEK TD 04/26/2011