

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000011226

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** SAVING THE PLANET WITH LITTLE HANDS, INC.

**Current Principal Place of Business:**

509 S CHICKISAW TRAIL  
UNIT 125  
ORLANDO, FL 32825

**New Principal Place of Business:**

**Current Mailing Address:**

509 S CHICKISAW TRAIL  
UNIT 125  
ORLANDO, FL 32825

**New Mailing Address:**

**FEI Number:** 27-4132556

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MONTALVO, ELAINE  
509 S CHICKISAW TRAIL  
#125  
ORLANDO, FL 32825 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: PD  
Name: MONTALVO, ELAINE  
Address: 509 S CHICKISAW TRAIL #125  
City-St-Zip: ORLANDO, FL 32825

Title: D  
Name: FIGUEROA, GEENIE  
Address: 2292 BLUE SAPPHIRE CIRCLE  
City-St-Zip: ORLANDO, FL 32837

Title: D  
Name: BORSTELMANN, STEPHEN M  
Address: 443 E. KINGS WAY  
City-St-Zip: WINTER PARK, FL 32789

Title: S  
Name: CARRERAS, SHARON  
Address: 89 ARTHUR STREET, APT 2  
City-St-Zip: WORCESTER, MA 01604

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: ELAINE MONTALVO

PRES

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date