

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009655

FILED  
Apr 08, 2012  
Secretary of State

**Entity Name:** HELPING HANDS OF CHRIST MINISTRIES, INC.

**Current Principal Place of Business:**

824 GOLDENBOUGH ROAD  
LAKE WALES, FL 33898

**New Principal Place of Business:**

**Current Mailing Address:**

824 GOLDENBOUGH ROAD  
LAKE WALES, FL 33898

**New Mailing Address:**

**FEI Number:** 45-3948235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, HENRY  
824 GOLDENBOUGH ROAD  
LAKE WALES, FL 33898 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: D  
Name: SMITH, HENRY  
Address: 824 GOLDENBOUGH ROAD  
City-St-Zip: LAKE WALES, FL 33898

Title: D  
Name: BARKER, KEITH  
Address: 110 EAGLE CT.  
City-St-Zip: BABSON PARK, FL 33827

Title: D  
Name: BROWN, KERRY  
Address: 550 HEATHER CT.  
City-St-Zip: BARTOW, FL 33830

Title: D  
Name: PARADES, JOEL  
Address: 7940 KIMMEL ST.  
City-St-Zip: FAIRBORN, OH 45324

Title: D  
Name: POLAND, STEVE  
Address: 3 TERR LANE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: D  
Name: SHARPLESS, DANNY  
Address: 130 ALDO RD.  
City-St-Zip: BABSON PARK, FL 33827

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: HENRY SMITH

D

04/08/2012

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

\_\_\_\_\_  
Date