

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18866

1. Entity Name

HELPING HANDS TO ANIMALS, INC.

FILED
Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90100 047 ****61.25

Principal Place of Business

1500 S.E. 3RD CT
110
DEERFIELD BEACH FL 33441
US

Mailing Address

1500 S.E. 3RD CT
110
DEERFIELD BEACH FL 33441-4463
US

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2792740

☒ Applied For

☐ Not Applied For

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COOKFAIR, JOAN
1423 E HILLSBORO BLVD
STE 518
DEERFIELD BCH FL 33442

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
QUICK, SHARON
435 B S.W. NATURA AVE.
DEERFIELD BCH. FL 33441 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Additio

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JOAN COOKFAIR
1423 E HILLSBORO BV 518
DEERFIELD BCH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Additio

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HUDGENS, JUDITH
4365 CORAL SPRINGS DR.
CORAL SPRINGS FL 33065 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Additio

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SHANI HCHANUS
5640 NW 61st St #1406
Coconut Creek FL 33073 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Additio

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
GRETCHEN SHEEHAN
702 S.E. 2nd Ave #408
DEERFIELD BEACH FL 33441 ☐ Delete **SECRETARY**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Additio

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Additio

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joan E. Cookfair (JOAN E. COOKFAIR) 01/19/00

954-428-90

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #