2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49185

Entity Name: JOINING HANDS INC. OF FLORIDA

FILED Apr 03, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5010 EL DESTINO DR. LEESBURG, FL 34748

Current Mailing Address: New Mailing Address:

PO BOX 493055 LEESBURG, FL 34749

FEI Number: 59-3203865 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:

LIGHTNER, BARBARA 5010 EL DESTINO DR. LEESBURG, FL 34748

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

US

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:DP () DeleteTitle:D C (X) Change () AdditionName:LIGHTNER BARBARA A,Name:LIGHTNER BARBARA A,Address:5010 EL DESTINO DR.Address:5010 EL DESTINO DR.

City-St-Zip: LEESBURG, FL City-St-Zip: LEESBURG, FL

Title: DB () Delete Title: VP (X) Change () Addition Name: GREYLOCK, MARY Name: GREYLOCK, MARY

Address: 33208 SAND DUNE LANE Address: 33208 SAND DUNE LANE
City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788

Title: DVP () Delete Title: P (X) Change () Addition

 Name:
 HOEY, TINA
 Name:
 HOEY, TINA

 Address:
 1407 AKRON DR.
 Address:
 1407 AKRON DR.

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 LEESBURG, FL 34748

Title: DB () Delete Title: () Change () Addition

 Name:
 LEBLANC, ANGELE B
 Name:

 Address:
 7326 HARBOR VIEW DR.
 Address:

 City-St-Zip:
 LEESBURG, FL 34788
 City-St-Zip:

 Name:
 HOWE, CINDY
 Name:
 METZGER, GERALDINE

 Address:
 2331 CENTENNIAL BLVD
 Address:
 1242 BELMOUNT CIRCLE

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 TAVARES, FL 32778

Title: T () Delete Title: DPT (X) Change () Addition

Name: MUNCHER, LACHELLE Name: GOLFORTH, CAROLYN

Address: 15629 JOHNS LAKE RD Address: 1325 CR48

City-St-Zip: CLERMONT, FL 34711 City-St-Zip: GROVELAND, FL 34736

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: TINA HOEY P 04/03/2004