2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2005
Secretary of State

DOCUMENT# N49185

Entity Name: JOINING HANDS INC. OF FLORIDA

Current Principal Place of Business:

5010 EL DESTINO DR.
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

PO BOX 493055
LEESBURG, FL 34749

New Mailing Address:

FEI Number: 59-3203865 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LIGHTNER, BARBARA
5010 EL DESTINO DR.
LEESBURG, FL 34748 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 C ( ) Delete
Name: LIGHTNER BARBARA A,
Address: 5010 EL DESTINO DR.
City-St-Zip: LEESBURG, FL

Title: VP ( ) Delete
Name: GREYLOCK, MARY
Address: 33208 SAND DUNE LANE
City-St-Zip: LEESBURG, FL 34788

Title: P ( ) Delete
Name: HOEY, TINA
Address: 1407 AKRON DR.
City-St-Zip: LEESBURG, FL 34748

Title: DB ( ) Delete
Name: LEBLANC, ANGELE B
Address: 7326 HARBOR VIEW DR.
City-St-Zip: LEESBURG, FL 34788

Title: D BS ( ) Delete
Name: METZGER, GERALDINE
Address: 1242 BELMOUNT CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: DPT ( ) Delete
Name: GOLFORTH, CAROLYN
Address: 1325 CR48
City-St-Zip: GROVELAND, FL 34736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LIGHTNER BARBARA A,
Address: 5010 EL DESTINO DR.
City-St-Zip: LEESBURG, FL

Title: DB (X) Change ( ) Addition
Name: GREYLOCK, MARY
Address: 33208 SAND DUNE LANE
City-St-Zip: LEESBURG, FL 34788

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP/T (X) Change ( ) Addition
Name: HOWE, CINDY
Address: 2331 CENTENNAL BOULVARD
City-St-Zip: LEESBURG, FL 34738

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: BARBARA LIGHTNER D 07/05/2005
Electronic Signature of Signing Officer or Director — Date