

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 09, 2006
Secretary of State

DOCUMENT# N92000000620

Entity Name: PEOPLE HELPING PEOPLE - DISASTER RELIEF, INC.**Current Principal Place of Business:**22 INVERRARY PLACE
ANNANDALE, NJ 08801 US**New Principal Place of Business:**51 EAST 25TH STREET
#501
NEW YORK, NY 10010 US**Current Mailing Address:**22 INVERRARY PLACE
ANNANDALE, NJ 08801 US**New Mailing Address:**51 EAST 25TH STREET
#501
NEW YORK, NY 10010 US**FEI Number:** 65-0369653**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WALLACE, OTIS T
852 SW 3RD ST
FLORIDA CITY, FL 33034 US**Name and Address of New Registered Agent:**TENNANT, MARGARET A
14810 RUE DE BAYONNE-5E
CLEARWATER, FL 33762 US

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: MARGARET A. TENNANT

05/09/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DT () Delete
Name: DANIELS, CATHERINE H.
Address: 22 INVERRARY PLACE
City-St-Zip: ANNANDALE, NJ 08801**Title:** DP () Delete
Name: GILLETTE, SUSAN L
Address: 1204 19TH AVENUE N.E.
City-St-Zip: ROCHESTER, MN 55906**Title:** D () Delete
Name: LUNT, BONNIE
Address: 51 EAST 25TH STREET SUITE 501
City-St-Zip: NEW YORK, NY 10010**Title:** D () Delete
Name: HENRY, JEANNE
Address: 1008 SEYMOUR AVENUE
City-St-Zip: NASHVILLE, TN 37206**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: DAVIS, DIANE
Address: 188 EAST 78TH STREET
City-St-Zip: NEW YORK, NY 10021**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DS (X) Change () Addition
Name: LUNT, BONNIE
Address: 51 EAST 25TH STREET SUITE 501
City-St-Zip: NEW YORK, NY 10010**Title:** D (X) Change () Addition
Name: SEARSON, PATRICIA
Address: 53 PEPPER HILL RD.
City-St-Zip: HOLMES, NY 12531**Title:** D () Change (X) Addition
Name: KONOW, SANDRA
Address: 22233 DOLOROSA STREET
City-St-Zip: WOODLAND HILLS, CA 91367

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BONNIE LUNT

DS

05/09/2006

Electronic Signature of Signing Officer or Director

Date