...OW: FILING FEE AFTER MAY 1 IS $155.00

...RPORATION ...AL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 4:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****138.75 ****138.75

DO NOT WRITE IN THIS SPACE

DOCUMENT # N94000001715

1. Corporation Name
PINELLAS COUNTY HELPING HANDS C.B. CLUB, INC.

Principal Place of Business / Mailing Address
2020 BAY STREET So. EAST
ST. PETERSBURG, FLORIDA 33705

3. Date Incorporated or Qualified: 4-7-94
3a. Date of Last Report: 4-7-94
4. FEI Number: 59-3235420 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21 2020 BAY ST. S.E.
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country: PINELLAS

2a. Mailing Address
26 2020 BAY ST. S.E.
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country: PINELLAS

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032,* Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
BERNARD H. MATHENEY
300 NORTHEAST BLVD, NORTH
ST. PETERSBURG, FLORIDA 33702

10. Name and Address of New Registered Agent
81 Name: SHERIN J. ROE
82 Street Address (P.O. Box Number is Not Acceptable): 2020 BAY ST. S.E.
83
84 City: ST. PETERSBURG FL 85 Zip Code: 33705

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Sherin J. Roe - PRESIDENT — 4-20-95
Signature, type/print name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	11 TITLE	PRESIDENT AND REGISTERED AGENT ☑ Change ☐ Addition
NAME	BERNARD H. MATHENEY	12 NAME	SHERIN J. ROE
STREET ADDRESS	300 NORTHEAST BLVD, NO.	13 STREET ADDRESS	2020 BAY ST. S.E.
CITY-ST-ZIP	ST. PETERSBURG, FLORIDA 33702	14 CITY-ST-ZIP	ST. PETERSBURG, FLORIDA 33705
TITLE	V. PRESIDENT	21 TITLE	V. PRESIDENT ☑ Change ☐ Addition
NAME	JOHN T. TAYLOR	22 NAME	JESS DOZIER
STREET ADDRESS	1510 - 20TH AVE. So.	23 STREET ADDRESS	1524 - 54TH AVE. NO.
CITY-ST-ZIP	ST. PETERSBURG, FLORIDA 33705	24 CITY-ST-ZIP	ST. PETERSBURG, FLORIDA 33713
TITLE	SECRETARY	31 TITLE	SECRETARY ☑ Change ☐ Addition
NAME	HELEN MATHENEY	32 NAME	NICOLE J. BAKER
STREET ADDRESS	8114 - 52nd WAY NO.	33 STREET ADDRESS	723 - 13TH AVE. So.
CITY-ST-ZIP	PINELLAS PARK, FLORIDA 34665	34 CITY-ST-ZIP	ST. PETERSBURG, FLORIDA
TITLE	TREASURER	41 TITLE	TREASURER ☑ Change ☐ Addition
NAME	STEVE LEMMING	42 NAME	GLORIA RENAUD
STREET ADDRESS	6030 - 71ST AVE. NO.	43 STREET ADDRESS	4011 - 9TH AVE. NO.
CITY-ST-ZIP	PINELLAS PARK, FLORIDA 34665	44 CITY-ST-ZIP	ST. PETERSBURG, FLORIDA 33713
TITLE	T	51 TITLE	T ☐ Change ☐ Addition
NAME	DON STRALVA	52 NAME	DEAN RICKEY
STREET ADDRESS	9170 - 79TH AVE.	53 STREET ADDRESS	7726 - 70TH ST. N.
CITY-ST-ZIP	SEMINOLE, FLORIDA 34647	54 CITY-ST-ZIP	PINELLAS PARK, FLORIDA 34665
TITLE	T	61 TITLE	☐ Change ☐ Addition
NAME	GINA HADLEY	62 NAME	
STREET ADDRESS	300 N.E. BLVD. N.	63 STREET ADDRESS	
CITY-ST-ZIP	SAINT PETERSBURG, FLORIDA 33702	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sherin J. Roe — 4-20-95 — (813) 895-9508
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #