

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001942

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** HEAR MY HANDS INCORPORATED

**Current Principal Place of Business:**

5076 ERNST COURT  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

5076 ERNST COURT  
ORLANDO, FL 32819

**New Mailing Address:**

**FEI Number:** 65-0491604      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

**Name and Address of New Registered Agent:**

VIGON, SUZIE  
5076 ERNST COURT  
ORLANDO, FL 32819      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: VIGON, SUZIE  
Address: 5076 ERNST CT.  
City-St-Zip: ORLANDO, FL 32819

Title: D      ( ) Delete  
Name: KNORR, CHRIS  
Address: 828 HANGING MOSS ROAD.  
City-St-Zip: ORLANDO, FL 32807

Title: D      ( ) Delete  
Name: LITRENTA, KATHERINE  
Address: 4325 PALO VERDE DR.  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D      ( ) Delete  
Name: SICILIANO, TERI  
Address: 145 SPRING LAKE HILL DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D      ( ) Delete  
Name: VIGON, FRANCES A  
Address: 6157 WINDING LAKE DR  
City-St-Zip: JUPITER, FL 33458 US

Title: VP      ( ) Delete  
Name: BACHE, HOLLAND  
Address: 6473 NORTHRIDGE WAY  
City-St-Zip: MORROW, GA 30260

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: SUZIE VIGON

PRES

05/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date