


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2007 08:00 A
Secretary of State

DOCUMENT # N94000003825 1. Entity Name HELP ME WALK, INCORPORATED	
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Principal Place of Business 6103 LAKESIDE DR LUTZ, FL 33558 US	Mailing Address 6103 LAKESIDE DR LUTZ, FL 33558 US
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02222007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SERRA, JERRIE L 6103 LAKESIDE DRIVE LUTZ, FL 33549

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8. 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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SERRA, JERRIE L 6103 LAKESIDE DR LUTZ, FL 33558
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MARTINETTO, COSIMO 5016 NORTH 40TH AVE. ST. PETERSBURG, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SERRA, KEVIN 6103 LAKESIDE DR LUTZ, FL 33558
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U000000699313 04/19/07-80037-018 61.25</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Jennie L. Serra</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <u>3-26-07</u> <small>Date</small>	Daytime Phone # <u>(813) 281-0300</u> <small>Daytime Phone #</small>