2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002613

FILED Sep 11, 2008 Secretary of State

Entity Name: HELPING HANDS FOR THE SORROWFUL, INC.

urrent P	rincipal Place of Business:	New Prince	cipal Place of Business:
581 CHA 56	LLENGER WAY		
	LM BEACH, FL 33417		
urrent N	lailing Address:	New Maili	ng Address:
	LLENGER WAY		
56 VEST PA	LM BEACH, FL 33417		
	: 06-1516905 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not rece	Number Not App	
ame and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
56	LLENGER WAY LM BEACH, FL 33417 US		
	e named entity submits this statement for the purpose of Florida.	se of changing	its registered office or registered agent, or bot
the State	e of Florida.	se of changing	its registered office or registered agent, or bot
the State	e of Florida.	se of changing	its registered office or registered agent, or bot Date
the State	e of Florida. RE:		
the State	e of Florida. RE: Electronic Signature of Registered Agent		Date
the State IGNATUI FFICER: tle: ame: ddress:	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: DP () Delete ALCEE, KETTY 4581 CHALLENGER WAY #56	ADDITION Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIRECTO @AOL (X) Change () Addition ALCEE, KETTY 4581 CHALLENGER WAY #56
the State IGNATUI FFICER ttle: ame: ddress: ty-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: DP () Delete ALCEE, KETTY 4581 CHALLENGER WAY #56 WEST PALM BEACH, FL 334178056 DVP () Delete O'LEARY, MARY LOU 1201 E PINCREST CIR	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIRECTO @AOL (X) Change () Addition ALCEE, KETTY 4581 CHALLENGER WAY #56 WEST PALM BEACH, FL 334178056

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: KETTY ALCEE DIR 09/11/2008