

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000002808

FILED
May 01, 2003
Secretary of State

Entity Name: COMMUNITY HELPS, FLORIDA, INCORPORATED

Current Principal Place of Business:

4414 FLORIDA NATIONAL DR.
110
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

4414 FLORIDA NATIONAL DR.
110
LAKELAND, FL 33813

New Mailing Address:

PO BOX 7423
LAKELAND, FL 33807 US

FEI Number: 59-3524216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOYD, PATRICIA
408 AVENUE A NE
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

LOYD, PATRICIA
466 DAISY WAY
WINTER HAVEN, FL 33884 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:

05/01/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOYD, GERALD G
Address: 450 MAPLE AVENUE
City-St-Zip: PITTSBURGH, PA 15218

Title: VD () Delete
Name: LOYD, PATRICIA A
Address: 450 AVENUE A NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: TD () Delete
Name: WORTHY, JACQUELYN Y
Address: 1051 OLD SOUTH DRIVE
City-St-Zip: LAKELAND, FL 33811

Title: SD (X) Delete
Name: MCCORMICK, DONNA V
Address: 1437 LOTELA AVENUE
City-St-Zip: LAKELAND, FL 33805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOYD, GERALD G
Address: 450 MAPLE AVENUE
City-St-Zip: PITTSBURGH, PA 15218 US

Title: VD (X) Change () Addition
Name: LOYD, PATRICIA A
Address: 466 DAISY WAY
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: STD (X) Change () Addition
Name: WORTHY, JACQUELYN Y
Address: PO BOX 90944
City-St-Zip: LAKELAND, FL 33804 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACQUELYN Y. WORTHY

STD

05/01/2003

Electronic Signature of Signing Officer or Director

Date