


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90410 014 ****61.25

DOCUMENT # N98000007133 1. Entity Name HELPING KIDS THRIFT & GIFT, INC.			
Principal Place of Business 10092 W. COLONIAL DR. OCFEE, FL 34761		Mailing Address 10092 W. COLONIAL DR. OCFEE, FL 34761	
2. Principal Place of Business 10376 E. Colonial Dr. Suite, Apt. #, etc. 126 City & State Orlando Zip 32817 Country USA		3. Mailing Address 10376 E. Colonial Dr. Suite, Apt. #, etc. 126 City & State Orlando Zip 32817 Country USA	
4. FEI Number 59-3556330		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		04212006 Chg-NP CR2E037 (11/05)	
6. Name and Address of Current Registered Agent FIOLA, YOLANDE 10092 W. COLONIAL DR. OCFEE, FL 34761 <i>(Deceased)</i>		7. Name and Address of New Registered Agent Name Lynn E. Richter Street Address (P.O. Box Number is Not Acceptable) 10376 E. Colonial Dr. Suite, Apt. #, etc. 126 City & State Orlando FL Zip Code 32817	
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 <u>Lynn E. Richter, Exec. Director</u> 4/25/06 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	D	FIOLA, YOLANDE	720 MAIN ST. WINDERMERE, FL 34786
			<input checked="" type="checkbox"/> Delete
	D	KUDLOWITZ, BARRY	112 WYMROE ROAD WINTER PARK, FL 32789
			<input checked="" type="checkbox"/> Delete
	D	DAVID, JOSWICK	900 N MAITLAND AVE MAITLAND, FL 32751
			<input checked="" type="checkbox"/> Delete
	D	JONES, JOEL	104 SECLUDED OAK CT. CASSELBERRY, FL 32707
			<input checked="" type="checkbox"/> Delete
			<input type="checkbox"/> Delete
			<input type="checkbox"/> Delete
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	D	Lynn E. Richter	310 Camellia St Chuluota, FL 32766
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	D	Sherry Boole	665 E. Mills Rd. Chuluota, FL 32766
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	D	Malissa King	136 E. 10th St. Chuluota, FL 32766
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	D	BARBARA GUERRA	147 Sandpine Circle Sanford, FL 32773
			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
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>Lynn E. Richter</u> <u>Lynn E. Richter</u> 4/25/06 407-382-6004 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			



ATTACHMENT 40076218
Division of Corporations

2006 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	N98000007133
Business Entity Name	HELPING KIDS THRIFT & GIFT, INC.
Original File Date	01/01/1999

FEI Number 59-3556330

Principal Address 10892 W. COLONIAL DR.
OCOE, FL 34761Mailing Address 10892 W. COLONIAL DR.
OCOE, FL 34761Registered Agent YOLANDE FIOLA
10892 W. COLONIAL DR
OCOE, FL 34761 US

Officer/Director Name And Address

D
YOLANDE FIOLA
720 MAIN ST.
WINDERMERE, FL 34786D
BARRY KUDLOWITZ
112 WYMROE ROAD
WINTER PARK, FL 32789D
JOSWICK DAVID
900 N MAITLAND AVE
MAITLAND, FL 32751D
JOEL JONES
104 SECLUDED OAK CT.
CASSELBERRY, FL 32707

See correct copy
4/25/06