

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000129501

FILED
Apr 28, 2004
Secretary of State

Entity Name: THE HOLDING HANDS PROJECT, INC.

Current Principal Place of Business:

1132 HOLLYWOOD AVE
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

1132 HOLLYWOOD AVE
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 54-2132136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUMBLEY, CHRISTINA
1132 HOLLYWOOD AVE
CLEARWATER, FL 33759

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CRUMBLEY, CHRISTINA
Address: 1132 HOLLYWOOD AVE
City-St-Zip: CLEARWATER, FL 33759

Title: VD () Delete
Name: CRUMBLEY, MICHAEL
Address: 1132 HOLLYWOOD AVE
City-St-Zip: CLEARWATER, FL 33759

Title: TD () Delete
Name: STENGER, ROGER
Address: 2804 EDENWOOD ST
City-St-Zip: CLEARWATER, FL 33759

Title: SD () Delete
Name: STENGER, VIRGINIA
Address: 2804 EDENWOOD ST
City-St-Zip: CLEARWATER, FL 33759

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINA CRUMBLEY

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date