2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000129501

Entity Name: THE HOLDING HANDS PROJECT, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
675 CANTE	ERBURY ROAD TER, FL 33764	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ERBURY ROAD TER, FL 33764	US	420 ARROWHEAD CO OLDSMAR, FL 34677	URT US	
FEI Number:	54-2132136 FE	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	Y, CHRISTINA PS WHEAD COURT , FL 34677 US	SD			
The above in the State		nits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	E:				
Electronic Signature of Registered Agent			ent	Date	
Election Cam	paign Financing Tru	st Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Dele CRUMBLEY, CHRIS 420 ARROWHEAD C OLDSMAR, FL 3467	TINA COURT	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:			Title: (Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TD () Delete STENGER, ROGER 675 CANTERBURY ROAD CLEARWATER, FL 33764 US		Title: (Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	SD () Delete STENGER, VIRGINIA 675 CANTERBURY ROAD CLEARWATER, FL 33764 US		Title: (Name: Address: City-St-Zip:	() Change () Addition	

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 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 04/30/2008