

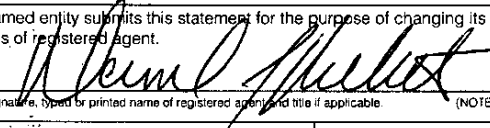
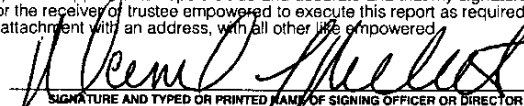


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90975 032 ***150.00

DOCUMENT # P04000067993 1. Entity Name HELPING HAND HOME BUYERS, INC.					
Principal Place of Business 5840 RED BUG LAKE RD #325 WINTER SPRINGS, FL 32708				Mailing Address 5840 RED BUG LAKE RD #325 WINTER SPRINGS, FL 32708	
2. Principal Place of Business 5840 Red Bug Lake Rd.		3. Mailing Address 5840 Red Bug Lake Rd.			
Suite, Apt. #, etc. # 285		Suite, Apt. #, etc. # 285		03122005 Chg-P CR2E034 (10/03)	
City & State Winter Springs, FL.		City & State Winter Springs, FL.		4. FEI Number 75-7154100	
Zip 32708		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RUNCK, TONY 5840 RED BUG LAKE RD #325 WINTER SPRINGS, FL 32708				7. Name and Address of New Registered Agent Name Daniel Roberts Street Address (P.O. Box Number is Not Acceptable) 5840 Red Bug Lake Rd. #285 City Winter Springs FL Zip Code 32708	
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:  DATE: 4/29/05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUNCK, TONY 5840 RED BUG LAKE RD #325 WINTER SPRINGS, FL 32708	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS, DANIEL 5840 RED BUG LAKE RD #325 WINTER SPRINGS, FL 32708	<input type="checkbox"/> Delete	D Roberts, Daniel 5840 Red Bug Lake Rd. #285 Winter Springs, FL 32708	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.					
SIGNATURE: 			Date: 4/29/05 Daytime Phone #: 407-924-8000		