2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000039919

Entity Name: HELP IS ON THE WAY INC.

BENNETT, GLÁDYS L

LAKELAND, FL 33809 US

7510 FOLK WAY

Name:

Address:

City-St-Zip:

FILED Nov 03, 2009 Secretary of State

	mei Hilli io	ON THE WAT INC.		
Current Principal Place of Business:			New Principal Place of Business:	
721 GILMO LAKELANI	DRE AVE D, FL 33801	US		
Current Mailing Address:			New Mailing Address:	
721 GILMO LAKELANI	DRE AVE D, FL 33801	US		
FEI Number	: 20-4520132	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and Address of	New Registered Agent:
COOPER, SAMUEL R 590 ROB ROY DR. CLERMONT, FL 34711 US		US		
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DIR (COOPER, SAN 590 ROB ROY CLERMONT, F	DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	DIR (X COOPER, BAH 590 ROB ROY CLERMONT, F	DR.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DIR (BENNETT, OR 7510 FOLK W LAKELAND, FI	AY	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	DIR () Delete	Title:	()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.

Name:

Address:

City-St-Zip:

SIGNATURE: SAMUEL R. COOPER PRES 11/03/2009