## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000051484

Address:

City-St-Zip:

19215 LIVINGSTON AVE

LUTZ, FL 33559

Entity Name: HAND IN HAND ACADEMY, INC

FILED Jan 17, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 19215 LIVINGSTON AVE LUTZ, FL 33559 **Current Mailing Address: New Mailing Address:** 19215 LIVINGSTON AVE LUTZ, FL 33559 FEI Number: 56-2288510 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: VILES, WENDY 19215 LIVINGSTON AVE LUTZ, FL 33559 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD ( ) Delete Title: () Change () Addition VILES, WENDY Name: Name: 19215 LIVINGSTON AVE Address: Address: City-St-Zip: LUTZ, FL 33559 City-St-Zip: Title: VTD Title: () Change () Addition () Delete Name: ALEXANDER, JEFFREY Name: 19215 LIVINGSTON AVE Address: Address: City-St-Zip: LUTZ. FL 33559 City-St-Zip: Title: Title: (X) Delete () Change () Addition BOLDUC, PENNY Name: Name: 19215 LIVINGSTON AVE Address: Address: City-St-Zip: LUTZ, FL 33559 City-St-Zip: Title: (X) Delete Title: () Change () Addition LARSEN, CHERYL Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: JEFFREY W ALEXANDER VTD 01/17/2007