

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000101585**

1. Corporation Name:

HAND IN HAND GROUP, INC.

Principal Place of Business

**2475 ENTERPRISE RD.,STE.100
CLEARWATER FL 33763**

Mailing Address

**2475 ENTERPRISE RD.,STE.100
CLEARWATER FL 33763**

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90150 008 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1998

4. FEI Number

59-3546687

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GOTTUEB & GOTTUEB, P.A.
2475 ENTERPRISE RD.,STE.100
CLEARWATER FL 33763**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **FORD, LINDA**
STREET ADDRESS **2475 ENTERPRISE RD.,STE.100**
CITY-ST-ZIP **CLEARWATER FL 33763**

TITLE ☐ DELETE

NAME **WHITE, RON**
STREET ADDRESS **2475 ENTERPRISE RD.,STE.100**
CITY-ST-ZIP **CLEARWATER FL 33763**

TITLE ☐ DELETE

NAME **OPATICH, RON**
STREET ADDRESS **2475 ENTERPRISE RD.,STE.100**
CITY-ST-ZIP **CLEARWATER FL 33763**

TITLE ☐ DELETE

NAME **GOTTUEB, JERRY**
STREET ADDRESS **2475 ENTERPRISE RD.,STE.100**
CITY-ST-ZIP **CLEARWATER FL 33763**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727-791-1977

CR2E034 (1/98)