

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008705

Entity Name: HILLSBOROUGH EMERGENCY LONG TERM RECOVERY (HELP), INC.

Current Principal Place of Business:

3627 A WEST WATERS AVENUE
TAMPA, FL 33614

Current Mailing Address:

3627 A WEST WATERS AVENUE
TAMPA, FL 33614

FEI Number: 20-3348539

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUTHERAN SERVICES FLORIDA, INC.
3627 A WEST WATERS AVENUE
TAMPA,, FL 33614 US

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

Officer/Director Detail :

Title P
Name MANDELL, LINDA MS
Address 8834 ALAFIA COVE DRIVE.
City-State-Zip: RIVERVIEW FL 33569

Title VP
Name YARBOROUGH, DAVID MR
Address 3627 A WEST WATERS AVENUE
City-State-Zip: TAMPA FL 33614

Title S
Name MYERS, KATHY MS
Address 2002 NORTH FLORIDA
City-State-Zip: TAMPA FL 33602

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID YARBOROUGH

VICE PRESIDENT HELP

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date