

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000008226

**Entity Name:** HANDS EXTENDED WORSHIP CENTER, INC.

**Current Principal Place of Business:**

10641 DEAN ST  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

10641 DEAN ST  
BONITA SPRINGS, FL 34135

**FEI Number:** 47-4773636

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COLLINS, WENDY E  
10641 DEAN ST.  
BONITA SPRINGS, FL 34135 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 COLLINS, WENDY E  
Address 10641 DEAN ST  
City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY  
Name VANDALL, BONITA  
Address 2685 HORSESHOE DR. #215  
City-State-Zip: NAPLES FL 34104

Title TREASURER  
Name COUSINS, SUSAN  
Address 4266 SPRINGS LANE  
City-State-Zip: BONITA SPRINGS FL 34134

*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:** WENDY COLLINS

**PRESIDENT**

**01/24/2017**

Electronic Signature of Signing Officer/Director Detail

Date