

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000008061

Entity Name: LITTLE HANDS, BIG HEARTS LITTLE PEOPLE'S SERVICE ORGANIZATION, INC.

Current Principal Place of Business:

7045 RAPID RIVER DRIVE WEST
JACKSONVILLE, FL 32219

Current Mailing Address:

PO BOX 77044
JACKSONVILLE, FL 32226 US

FEI Number: 82-2951491

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ANTHONY, ERIN
PB BOX 77044
JACKSONVILLE, FL 32226 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 FOUNDER, PRESIDENT
Name ANTHONY, ERIN N
Address PO BOX 77044
City-State-Zip: JACKSONVILLE FL 32226

Title TREASURER, INTERNAL OPERATIONS DIRECTOR
Name DORTCH, ERIKA N
Address PO BOX 77044
City-State-Zip: JACKSONVILLE FL 32226

Title D
Name ANTHONY, ERIN N
Address PO BOX 77044
City-State-Zip: JACKSONVILLE FL 32226

Title BOARD OF DIRECTORS
Name DORTCH, EVA
Address PO BOX 77044
City-State-Zip: JACKSONVILLE FL 32226

Title BOARD OF DIRECTORS
Name FOREMAN, TAMARA
Address PO BOX 77044
City-State-Zip: JACKSONVILLE FL 32226

Title BOARD OF DIRECTORS
Name WILSON, AVIS
Address PO BOX 77044
City-State-Zip: JACKSONVILLE FL 32226

Title BOARD OF DIRECTORS
Name MOISE, WECLAIGE
Address PO BOX 77044
City-State-Zip: JACKSONVILLE FL 32226

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: DR. ERIN ANTHONY

EXECUTIVE DIRECTOR

04/23/2025

Electronic Signature of Signing Officer/Director Detail

Date