

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004888

Entity Name: C.B. HELPING HANDS MINISTRIES CORPORATION

Current Principal Place of Business:

3353 DUNN AVE
UNIT 5,6
JACKSONVILLE, FL 32218

Current Mailing Address:

P.O. BOX 7115
GRANTS, NM 87020 US

FEI Number: 45-4424911

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

INUSAH, SHELIA APOSTLE
3353 DUNN AVE UNIT 5
JACKSONVILLE, FL 32218 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: SHELIA INUSAH

02/14/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CP
Name INUSAH, SHELIA G APOSTLE
Address 13296 SMITHWICK LANE
City-State-Zip: JACKSONVILLE FL 32226

Title DVP
Name BENJAMIN, CHRISTOPHER
Address 115 FOXWOOD CIRCLE
City-State-Zip: OLIVER SPRINGS TN 37840

Title D
Name ANDERSON, STEPHANIE
Address 4196 ANDERSONWOOD DRIVE
City-State-Zip: JACKSONVILLE FL 32218

Title S
Name BENJA,MIN, DRE M
Address 3353 DUNN AVE
UNIT 5,6
City-State-Zip: JACKSONVILLE FL 32218

Title T
Name KIRK, WILMA
Address 476 WILLIAMS DRIVE
City-State-Zip: CHATTANOOGA TN 37421

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: SHELIA INUSAH

OWNER/APOSTLE

02/14/2022

Electronic Signature of Signing Officer/Director Detail

Date