

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001290

Entity Name: HELP SERVICES, INC.

FILED  
Mar 29, 2011  
Secretary of State

**Current Principal Place of Business:**

171 MONROE LANE  
LEXINGTON, SC 29072

**New Principal Place of Business:**

**Current Mailing Address:**

171 MONROE LANE  
LEXINGTON, SC 29072

**New Mailing Address:**

FEI Number: 26-1599694

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: YOUNG, RONNIE L  
Address: 171 MONROE LANE  
City-St-Zip: LEXINGTON, SC 29072

Title: VCVF  
Name: HARDMAN, JAMES F  
Address: 171 MONROE LANE  
City-St-Zip: LEXINGTON, SC 29072

Title: VPST  
Name: KEIM, JOHN D  
Address: 171 MONROE LANE  
City-St-Zip: LEXINGTON, SC 29072

Title: VP  
Name: CAMIT, DONNA S  
Address: 171 MONROE LANE  
City-St-Zip: LEXINGTON, SC 29072

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

SIGNATURE: JOHN D KEIM

VPST

03/29/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date