2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004827

Entity Name: HELPING CHILDREN AND FAMILY NEED INC.

FILED Feb 15, 2024 **Secretary of State** 5531713482CC

Current Principal Place of Business:

82 PINE STREET

PORT JEFFERSON STATION, NY 11776

Current Mailing Address:

82 PINE STREET

PORT JEFFERSON STATION. NY 11776 US

FEI Number: 46-2840257 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 3458 LAKESHORE DRIVE TALLAHASSEE, FL 32312 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: KAPHY SHIN 02/15/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DΡ Title **TREASURER**

EDMOND, JOEL LIBERTIN, MARIE ANJE DESIR Name Name

82 PINE STREET 1213 TUSCOLA AVE Address Address

City-State-Zip: SALISBURY MD 21801 PORT JEFFERSON STATION NY City-State-Zip:

11776

CORRESPONDING SECRETARY Title Title VΡ

Name DESIRAL, JEAN CLAUDY Name LIBERTIN, KELLY

Address **RUE PERIEL** Address 1213 TUSCOLA AVE #10

City-State-Zip: MARIANI City-State-Zip: SALISBURY MD 21801

Title CORRESPONDING SECRETARY Title **PASTOR**

SANSARIQUE, NUMA Name EDMOND. JOCELYN Name Address 973 7TH AVENUE 321 ROUTE RAILLE Address LACHINE H8S 3A5 City-State-Zip: CARREFOUR PORT-AU-PRINCE City-State-Zip:

Title **SECRETARY** Name RUFANE, FLOREAL

82 PINE STREET City-State-Zip: PORT JEFFERSON STATION NY

11776

Address

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.

02/15/2024 SIGNATURE: EDMOND JOEL DP