2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004827

Entity Name: HELPING CHILDREN AND FAMILY NEED INC.

FILED
Mar 20, 2020
Secretary of State
5785164134CC

Current Principal Place of Business:

1213 TUSCOLA AVENUE SALISBURY. MD 21801

Current Mailing Address:

1213 TUSCOLA AVENUE SALISBURY, MD 21801 US

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

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 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 03/20/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DP Title TREASURER

Name EDMOND, JOEL Name LIBERTIN, MARIE ANJE DESIR

Address 259-32 CRAFT AVENUE Address 1213 TUSCOLA AVE
City-State-Zip: ROSEDALE NY 11422 City-State-Zip: SALISBURY MD 21801

Title EXECUTIVE SECRETARY Title CORRESPONDING SECRETARY

Name LIBERTIN, KELLY Name ULYSSE, LEMITHE
Address 1213 TUSCOLA AVE Address 201 LAMENTIN 54

City-State-Zip: SALISBURY MD 21801 City-State-Zip: CARREFOUR PORT-AU-PRINCE

Title CORRESPONDING SECRETARY Title PASTOR

NameFLOREAL, RUFANENameSANSARIQUE, NUMAAddress1756 RUE DELORMEAddress321 ROUTE RAILLE

City-State-Zip: LAVAL QUEBEC H7M 2W3 City-State-Zip: CARREFOUR PORT-AU-PRINCE

Title CORRESPONDING SECRETARY

Name EDMOND, JOCELYN
Address 973 7TH AVENUE
City-State-Zip: LACHINE H8S 3A5

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: JOEL EDMOND PRESIDENT 03/20/2020

Date