

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000004939

**FILED**  
**May 03, 2016**  
**Secretary of State**  
**CC6990473841**

**Entity Name:** H20- HELP TO OTHERS INCORPORATED

**Current Principal Place of Business:**

3192 WAX MYRTLE CT  
KISSIMMEE, FL 34744

**Current Mailing Address:**

1204 WALLINGFORD RD  
KNOXVILLE, TN 37923 US

**FEI Number:** 47-3778597

**Certificate of Status Desired:** No

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

WATERS, ROBERT L III  
3192 WAX MYRTLE CT  
KISSIMMEE, FL 34744 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 C  
Name WATERS, ROBERT L III  
Address 9168 LAKE AVON DR  
City-State-Zip: ORLANDO FL 32829

Title C  
Name FULLER, MARC  
Address 250 NEW YORK AVE  
City-State-Zip: NEWARK NJ 07105

Title C  
Name JORDAN, JOSH  
Address 250 NEW YORK AVE  
City-State-Zip: NEWARK NJ 07105

*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:** ROBERT WATERS

**DIRECTOR**

**05/03/2016**

Electronic Signature of Signing Officer/Director Detail

Date