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. PRESIDENT

SIGNATURE: PAMELA MANDESA TURNER

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail :				
Title	Ρ	Title	SEC	
Name	TURNER, PAMELA	Name	BROWN, JOSEPH	
Address	2216 NORTH 43RD STREET	Address	1905 SOUTH 25TH STREET	
, ,	FORT PIERCE FL 34946	City-State-Zip:	SUITE 105 FORT PIERCE FL 34947	
				Title
Name	HENDERSON, LASHONDA			
Address	1905 SOUTH 25TH STREET STE 105			

City-State-Zip: FORT PIERCE FL 34947

SIGNATURE:

	Electronic Signature of Registered Agent				
fficer/Director Detail :					
tle	Ρ	Title	SEC		
ame	TURNER, PAMELA	Name	BROWN, JOSEPH		
dress	2216 NORTH 43RD STREET	Address	1905 SOUTH 25TH STREET		
ty-State-Zip:	FORT PIERCE FL 34946	0.1.0	SUITE 105		
		City-State-Zip:	FORT PIERCE FL 34947		
tle	TRES				
ame	HENDERSON, LASHONDA				
dress	1905 SOUTH 25TH STREET				

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.

FEI Number: 86-2412924

Name and Address of Current Registered Agent:

TURNER, PAMELA 1905 SOUTH 25TH STREET

FORT PIERCE, FL 34947 US

STE 105

FORT PIERCE, FL 34947 US

FORT PIERCE, FL 34947

Current Mailing Address:

1905 SOUTH 25TH STREET STE 105

Current Principal Place of Business:

1905 SOUTH 25TH STREET SUITE 105

DOCUMENT# N2100002490

Entity Name: CARING HANDS & HEARTS OUTREACH INC

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Jan 18, 2023 Secretary of State 4700107603CC

Certificate of Status Desired: No

FILED

01/18/2023