2001 UNIFORM BUSINESS REPORT (UBR)

May 05, 2001 8:00 am Secretary of State **DOCUMENT # 722474** 1. Entity Name HOPE INTERNATIONAL MINISTRIES, INC. 05-05-2001 90617 001 ***280.00 Principal Place of Business Mailing Address 11415 HOPE INTERNATIONAL DR 11415 HOPE INTERNATIONAL DR **TAMPA FL 33625** TAMPA FL 33625 40822 HS 2. Principal Place of Business 3. Mailing Address -Suite; Apt-#, eto.-Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE -- ~ City & State City & State 4. FEI Number Applied For 62-0879012 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRUM Molecu Street Address (P.O. Box Number is Not Acceptable) COLE: ARLIE 11415 HODE JAITERN ATTIONA 1.1415-HOPE INTERNATIONAL DR **TAMPA FL 33625** 7AMDA 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Pavable to Trust Fund Contribution. \Box **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITI F SD ☐ Delete TITLE Change ☐ Addition NAME VARNEY, AL NAME STREET ADDRESS 11415 HOPE INTERNATIONAL DR STREET ADDRESS CITY-ST-7IP **TAMPA FL 33625** CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME ARLIE, COLE NAME STREET ADDRESS 11415 HOPE INTERNATIONAL DR STREET ADDRESS CITY-ST-ZIP TAMPA FL 33625 CITY-ST-ZIP DS TITLE Delete TITLE Change ☐ Addition HESTON, RICHARD NAME NAME STREET ADDRESS 11415 HOPE INTERNATIONAL DR STREET ADDRESS CITY-ST-ZIP TAMPA FL 33625 CITY-ST-ZIP D TITLE ☐ Delete TITLE Change ☐ Addition NAME DUTTERY, BILL NAME STREET ADDRESS 11415 HOPE INTERNATIONAL DR STREET ADDRESS CITY+ST-ZIP TAMPA FL 33625 CITY-ST-ZIP DT ☐ Delete TITLE Change ☐ Addition SCHAFFER, ALFRED NAME NAME STREET ADDRESS 11415 HOPE INTERNATIONAL DR STREET ADDRESS CITY-ST-ZIP TAMPA FL 33625 CITY-ST-ZIP □ Delete TITLE Change ☐ Addition NAME MORROW, BRYAN NAME STREET ADDRESS 11415 HOPE INTERNATIONAL DR STREET ADDRESS CITY-ST-ZIP TAMPA FL 33625 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09-72-C

8/3 · 16/ · /2/ 4

Dayting Phone #