

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005086

FILED
Apr 26, 2006
Secretary of State

Entity Name: NATIONAL HOUSE OF HOPE, INC.

Current Principal Place of Business:

2036 36TH ST
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

2036 36TH ST
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 59-3740026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

G & L AGENT SERVICES, INC.
390 N ORANGE AVE 600
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

JSN FINANCIAL SERVICES, INC
511 ELDRON AVE
DELTONA, FL 32738 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: GABRIEL SOTO

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: MARTINEZ, KITTY
Address: 4398 NEW BROAD STREET
City-St-Zip: ORLANDO, FL 32814 US

Title: DIR () Delete
Name: DORNBUSCH, RAY SECRETA
Address: 101 EAST BAY COURT
City-St-Zip: TRAVERSE CITY, MI 49686 US

Title: DIR () Delete
Name: TROLLINGER, SARA E PRESIDE
Address: 2036 36TH STREET
City-St-Zip: ORLANDO, FL 32839 US

Title: DIR () Delete
Name: GABRI, DAVE TREASUR
Address: 9714 GREEN ISLAND COVE
City-St-Zip: WINDERMERE, FL 34786 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SARA E TROLLINGER

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date