

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005086

FILED  
May 01, 2010  
Secretary of State

**Entity Name:** NATIONAL HOUSE OF HOPE, INC.

**Current Principal Place of Business:**

2020 36TH ST  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 560503  
ORLANDO, FL 32856

**New Mailing Address:**

**FEI Number:** 59-3740026      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

TROLLINGER, SARA E MS.  
2020 36TH STREET  
ORLANDO, FL 32839    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

**OFFICERS AND DIRECTORS:**

**Title:** DIR  
**Name:** THOMAS, MIA CHAIR  
**Address:** 1400 W FAIRBANKS AVE., SUITE 202  
**City-St-Zip:** WINTER PARK, FL 32789 US

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

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

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

**Title:** DIR  
**Name:** STAVER, MATHEW VICE CH  
**Address:** 142 SEMORAN BLVD #321  
**City-St-Zip:** CASSELBERRY, FL 32707 US

**Title:** DIR  
**Name:** HUGHES, JACK SECRETA  
**Address:** 1378 CARPERS FARM WAY  
**City-St-Zip:** VIENNA, VA 22182

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: SARA TROLLINGER

DIR

05/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date