2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# N96000003248

Entity Name: BLESSED HOPE ACADEMY, INC.

Current Principal Place of Business:

1541 AMHERST LANE
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 450025
KISSIMMEE, FL 347450025

New Mailing Address:

FEI Number: 59-3413622 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RIVERA-PEREZ, NANCY
1541 AMHERST LANE
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: RIVERA-PEREZ, NANCY
Address: 1541 AMHERST LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete
Name: SANCHEZ, EDWIN
Address: 280 LA PAZ DRIVE
City-St-Zip: KISSIMMEE, FL 34743

Title: MOB ( ) Delete
Name: ALICEA, CARMEN M
Address: 280 LA PAZ DRIVE
City-St-Zip: KISSIMMEE, FL 34743

Title: D ( ) Delete
Name: PEREZ, JOSE A
Address: 1541 AMHERST LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: MOB ( ) Change (X) Addition
Name: STRICKLEN, ANDREA R
Address: 2337 VALLEY AVENUE
City-St-Zip: KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NANCY RIVERA-PEREZ D 04/27/2005

Electronic Signature of Signing Officer or Director — Date