

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Aug 10, 1999 8:00 am
Secretary of State

08-10-1999 90012 032 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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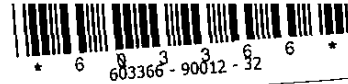
DOCUMENT # N97000005537 ✓

1. Corporation Name

OPERATION HOPE, INC.

Principal Place of Business
3501 OLD DIXIE HWY.
RIVIERA BEACH FL 33404

Mailing Address
5183 PAT PL.
W. PALM BEACH FL 33407



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 09/25/1997 4. FEI Number 65-0171969 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent

BOWERS, KENNETH L
5183 PAT PL.
WEST PALM BEACH FL 33407

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (Type, typed or printed name, and date if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☒ Addition
NAME	BURNEY, GERTRUDE	1.2 NAME	WARRIE LEONARD
STREET ADDRESS	1132 THIRD ST.	1.3 STREET ADDRESS	1901 W. 23 rd St.
CITY-ST-ZIP	RIVIERA BEACH FL 33404	1.4 CITY-ST-ZIP	Riviera Bch, FL 33404
TITLE	SD ☐ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME	BOWERS, JEANNETTE L.	2.2 NAME	FRANK REESE
STREET ADDRESS	3700 AUSTRALIAN AVE. N. 915 35 th St.	2.3 STREET ADDRESS	1431 13 th St.
CITY-ST-ZIP	W. PALM BEACH FL 33404 33407	2.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	TD ☐ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME	BRADLEY, CYRILLA	3.2 NAME	GARY STUBBS
STREET ADDRESS	2331 SW 80TH TERR.	3.3 STREET ADDRESS	2501 Broadway
CITY-ST-ZIP	MIRAMAR FL 33025	3.4 CITY-ST-ZIP	Riviera Beach, FL 33404
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME	FRANK REESE	4.2 NAME	Brian Sedlacek
STREET ADDRESS	1431 13 th St.	4.3 STREET ADDRESS	2501 Broadway
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	4.4 CITY-ST-ZIP	Riviera Beach, FL 33404
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☒ Addition
NAME	GARY STUBBS	5.2 NAME	Joseph Carter
STREET ADDRESS	2501 Broadway	5.3 STREET ADDRESS	391 Kentucky Ave.
CITY-ST-ZIP	Riviera Beach, FL 33404	5.4 CITY-ST-ZIP	Et. Lauderdale, FL 33312
TITLE	D ☐ DELETE	6.1 TITLE	☐ Change ☒ Addition
NAME	Brian Sedlacek	6.2 NAME	Isabelle Cunningham
STREET ADDRESS	2501 Broadway	6.3 STREET ADDRESS	1301 W. 31 St.
CITY-ST-ZIP	Riviera Beach, FL 33404	6.4 CITY-ST-ZIP	Riviera Beach, FL 33404

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment to an address, with all other like empowered.

SIGNATURE: _____ Gertrude Burney, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

7.1 Title: D X Addition
7.2 Name: Matthew Russell
7.3 Street Address: 600 W. Blue Heron Blvd.
7.4 City, State, Zip: Riviera Beach, FL 33404

8.1 Title: D X Addition
8.2 Name: Tony McCray
8.3 Street Address: 2101 Australian Ave.
8.4 City, State, Zip: West Palm Beach, FL 33407