# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 02, 2008**
**Secretary of State**

DOCUMENT# N97000005537

**Entity Name:** OPERATION HOPE, INC.

**Current Principal Place of Business:**

2100 45TH ST.
#A4
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

300 10TH ST.,
#201
LAKE PARK, FL 33403

**Current Mailing Address:**

2100 45TH ST.
#A4
WEST PALM BEACH, FL 33407

**New Mailing Address:**

300 10TH ST.,
#201
LAKE PARK, FL 33403

**FEI Number: 65-0171969** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
**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:**

BOWERS, KENNETH L
2109 PINEHURST DR.
WEST PALM BEACH, FL 33407 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: PD ( ) Delete
Name: BURNEY, GERTRUDE
Address: 547 W. THIRD ST.
City-St-Zip: RIVIERA BEACH, FL 33404

Title: SD ( ) Delete
Name: BRYAN, PAULA
Address: 8820 N.W. 183RD TER
City-St-Zip: PALMETTO BAY, FL 33157

Title: TD ( ) Delete
Name: DARRISAW, MARGARET
Address: 1580 31ST ST. W.
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VPD ( ) Delete
Name: REESE, FRANK
Address: 1431 13TH STREET
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete
Name: RUSSELL, MATTHEW ESQ.
Address: 600 W. BLUE HERON BLVD.
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D ( ) Delete
Name: BROOKS, JACQUELINE DR.
Address: 5501 MADISON ST.
City-St-Zip: RIVIERA BEACH, FL 33404

**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: ( ) 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 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: GERTRUDE BURNEY PD 07/02/2008

Electronic Signature of Signing Officer or Director — Date