

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 01, 2004
Secretary of State**

DOCUMENT# N98000003339

Entity Name: PLACE OF HOPE, INC.

Current Principal Place of Business:

9117 ISALIAH LANE
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

9078 ISALIAH LANE
PALM BEACH GARDENS, FL 33418 US

Current Mailing Address:

9117 ISALIAH LANE
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

9078 ISALIAH LANE
PALM BEACH GARDENS, FL 33418 US

FEI Number: 65-0841384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BOULEVARD #211
PALM BEACH GARDENS, FL 33418 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: MULLINS, THOMAS D
Address: 9117 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: LOVETT, DEAN C
Address: 9117 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: CHRISTIANSEN, JOHN T
Address: 9117 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: KLOBA, JOSEPH
Address: 9117 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: WEINSTEIN, HARRIS
Address: 9117 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: MULLINS, TODD J
Address: 9117 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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 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: MARION BRITO

M

07/01/2004

Electronic Signature of Signing Officer or Director

Date