

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715911

**Entity Name:** THE HOUSE OF HOPE, INC.**Current Principal Place of Business:**908 SOUTHWEST 1ST ST.  
FT LAUDERDALE, FL 33312**Current Mailing Address:**908 SOUTHWEST 1ST ST.  
FT LAUDERDALE, FL 33312**FEI Number:** 23-7014595**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GLASSCOCK, SUSAN  
908 SOUTHWEST 1ST ST.  
FT LAUDERDALE, FL 33312 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:** SUSAN GLASSCOCK

01/03/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FUCIK, DONALD  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

Title            TRUSTEE  
Name            SCOTT, TERRY  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

Title            TREASURER  
Name            CARR, THOMAS  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

Title            TRUSTEE  
Name            JAQUITH, PAUL  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

Title            CEO, TRUSTEE  
Name            GLASSCOCK, SUSAN  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

Title            TRUSTEE  
Name            BATTLE, GLORIA J  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

Title            VP  
Name            SCHEVIS, DANIEL  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

Title            SECRETARY  
Name            NICHOLS, ROBERT G  
Address        908 SOUTHWEST 1ST ST.  
City-State-Zip: FT LAUDERDALE FL 33312

**Continues on page 2**

*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:** SUSAN GLASSCOCK

CEO

01/03/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name MAINES, DON  
Address 17401 SW 48 STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title TRUSTEE  
Name LAFONTAINE, MARK  
Address 2205 WILTON PARK DRIVE  
City-State-Zip: WILTON MANORS FL 33305

Title TRUSTEE  
Name RICHTER, JOANNE  
Address 1977 NE 15 AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33305