## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 750901** 

Entity Name: HOPE FAMILY SERVICES, INC.

**Current Principal Place of Business:** 

3215 9TH STREET WEST BRADENTON, FL 34205

**Current Mailing Address:** 

P.O. BOX 1624

BRADENTON, FL 34206

FEI Number: 59-1970241 Certificate of Status Desired: Yes

**FILED** Jan 12, 2023

**Secretary of State** 

9856301069CC

Date

Date

**BRADENTON FL 34206** 

Name and Address of Current Registered Agent:

YOUNG, CHARLYN 3215 9TH STREET WEST BRADENTON, FL 34205 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: CHARLYN YOUNG 01/12/2023

Electronic Signature of Registered Agent

City-State-Zip:

Officer/Director Detail:

Title CEO Title **PRESIDENT** 

YOUNG, CHARLYN Name WILLIAMS, KATIE Name

PO BOX 1624 Address PO BOX 1624 Address

City-State-Zip: **BRADENTON FL 34206** BRADENTON FL 34206 City-State-Zip:

Title **TREASURER** IMMEDIATE PAST PRESIDENT Title Name UNRUH, NEIL FRIEDRICH, III, DANIEL Name

Address PO BOX 1624 Address PO BOX 1624

**BRADENTON FL 34206** 

VΡ CROSS, MICHELLE Name

P.O. BOX 1624 Address

City-State-Zip:

Title

City-State-Zip: BRADENTON FL 34206

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.

01/12/2023 SIGNATURE: CHARLYN YOUNG CEO