

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005086

**Entity Name:** NATIONAL HOUSE OF HOPE, INC.

**Current Principal Place of Business:**

2020 36TH ST  
ORLANDO, FL 32839

**Current Mailing Address:**

PO BOX 560503  
ORLANDO, FL 32856

**FEI Number: 59-3740026**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TROLLINGER, SARA E MS.  
2020 36TH STREET  
ORLANDO, FL 32839 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title DIRECTOR  
Name TROLLINGER, SARA E  
Address 2573 STONEVIEW ROAD  
City-State-Zip: ORLANDO FL 32806

Title CHAIRMAN  
Name COPE, GEORGE DR.  
Address 707 NICOLET AVENUE  
City-State-Zip: ORLANDO FL 32789

Title DIRECTOR  
Name THOMAS, MARILYN  
Address 3508 W 89TH STREET  
City-State-Zip: LEAWOOD KS 66206

Title DIRECTOR  
Name PULLUM, STEVE  
Address 250 INTERNATIONAL PKWY, SUITE 340  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name CHRISTY, KATHERINE  
Address 300 INTERNATIONAL PKWY  
City-State-Zip: LAKE MARY FL 32746

Title PRESIDENT  
Name MATHIS, KARLA  
Address 2020 36TH ST  
City-State-Zip: ORLANDO FL 32839

Title DIRECTOR  
Name DOUGLAS, JUDY  
Address 10636 SPRING BUCK TRL  
City-State-Zip: ORLANDO FL 32825

*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: KARLA MATHIS**

**PRESIDENT**

**04/24/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date