2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REP	ORT

#### DOCUMENT# N0300002753

Entity Name: H.O.P.E.E MINISTRIES INC.

# Current Principal Place of Business:

5059 GLEN ALAN CT JACKSONVILLE, FL 32210

### **Current Mailing Address:**

PO BOX 14851 JACKSONVILLE, FL 32238

# FEI Number: 02-0666741

# Name and Address of Current Registered Agent:

OWENS, THELMA 866 S.W. NICHOLS TERRACE PORT ST. LUCIE, FL 34953 US Secretary of State CC8294171478

Certificate of Status Desired: No

FILED Aug 15, 2018

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
Officer/Director Detail :
Title P Title V

Title	Р	Title	V
Name	HOUSE, BEATRICE	Name	HOUSE, WINFORD
Address	5059 GLEN ALAN CT	Address	5059 GLEN ALAN CT
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210
Title	BM		
Title Name	BM JOHNSON, ROSE		

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: BEATRICE HOUSE

Р

Date

Electronic Signature of Signing Officer/Director Detail

Date