

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002274

Entity Name: HOPE PAVILION INC.**Current Principal Place of Business:**904 E. MOODY BLVD
BUNNELL, FL 32110**Current Mailing Address:**P.O. BOX 503
HASTINGS, FL 32145 US**FEI Number:** 59-3741370**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLEMAN, CHRISTOPHER
104 MANSON RD.
P.O. BOX 331
HASTINGS, FL 32145 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 TRUSTEE
Name COLEMAN, ALICE
Address 311 LODGE ST.
City-State-Zip: HASTINGS FL 32145

Title CEO
Name COLEMAN, ANTOINETTE
Address 10 ELIAS LN.
City-State-Zip: PALM COAST FL 32164

Title TREASURER
Name COLEMAN, JANICE
Address 311 LODGE ST.
City-State-Zip: HASTINGS FL 32145

Title PRESIDENT
Name WALKER, KATHY
Address P.O. BOX 14
City-State-Zip: HASTINGS FL 32145

Title SECRETARY
Name WILSON, BARBARA
Address 9960 LIGHT AVE.
City-State-Zip: HASTINGS FL 32145

Title TRUSTEE
Name HARRIS, DARRENTON
Address 113 HIBISCUS ST.
City-State-Zip: PALATKA FL 32177

Title TRUSTEE
Name SIMMONS, VELMA
Address 135 OCEAN PARKWAY
APT. 4L
City-State-Zip: BROOKLYN NY 11218

Title VP
Name COLEMAN, BARBARA
Address 71 BURNELL DRIVE
City-State-Zip: PALM COAST FL 32137

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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: ANTOINETTE COLEMAN

CEO

03/12/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name THOMAS, LATONYA
Address 9975 CHATTSWORTH RD.
City-State-Zip: MIDLAND GA 31820

Title TRUSTEE
Name COLEMAN, ANTHONY SR.
Address 212 VIVIAN DR.
City-State-Zip: HASTINGS FL 32145