

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002274

Entity Name: HOPE PAVILLION, INC.

Current Principal Place of Business:

110 PARK AVENUE
HASTINGS, FL 32145

Current Mailing Address:

PO BOX 503
HASTINGS, FL 32145 US

FEI Number: 59-3741370

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLEMAN, CHRISTOPHER
110 PARK AVENUE
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 DP
Name COLEMAN, CHRISTOPHER
Address 200 CHASE ST.
City-State-Zip: HASTINGS FL 32145

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

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

Title D
Name COLEMAN, TRANNDA
Address 200 CHASE ST.
City-State-Zip: HASTINGS FL 32145

Title D
Name WALKER, BENJAMIN
Address 603 EAST ST.
City-State-Zip: HASTINGS FL 32145

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: ALICE COLEMAN

DVP

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date