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: MARY ANN RICHARDSON

Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001078

Entity Name: NEW HOPE EMPOWERMENT CENTER, INC.

Current Principal Place of Business:

3351 HIGHWAY 17/92 SW LAKE HENRY PLAZA HAINES CITY, FL 33844

Current Mailing Address:

3351 LAKE HENRY PLAZA HAINES CITY, FL 33844

FEI Number: 38-3751076

Name and Address of Current Registered Agent:

RICHARDSON, MARY ANN 412 DR. MLK STREET DUNDEE, FL 33838 US Feb 02, 2021 Secretary of State 9596579241CC

FILED

Certificate of Status Desired: No

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 :

Officer/Director Detail.			
Title	Р	Title	С
Name	RICHARDSON, MARY ANN	Name	SMITH, DANIELE
Address	412 MLK STREET	Address	918 CHURCH STREET
City-State-Zip:	DUNDEE FL 33838	City-State-Zip:	LAKE HAMILTON FL 33851
Title	CHAIRMAN	Title	СС
Name	SIMMONS, DEBBIE	Name	CLARK, DENISE
Address	356 STERLING DR.	Address	350 24TH STREET
City-State-Zip:	WINTER HAVEN FL 33884	City-State-Zip:	WINTERHAVEN FL 33881
Title	т		
Name	FORD, YVETTE		
Address	P.O. BOX 24214		
City-State-Zip:	LAKELAND FL 33802		

PRESIDENT

02/02/2021

Date

Date