

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001487

Entity Name: DIAL HOPE FOUNDATION, INC.**Current Principal Place of Business:**2063 MAIN STREET
SARASOTA, FL 34237**Current Mailing Address:**P O BOX 953
SARASOTA , FL 34230 US**FEI Number:** 26-4326614**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STAIKOS, GILLIAN L
7436 MYRICA DR
SARASOTA, FL 34241 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:** GILLIAN L STAIKOS

02/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ALBRIGHT, JOE
Address 1720 OLD BEACH ROAD
City-State-Zip: ST. AUGUSTINE FL 32080

Title CHAIRMAN, DIRECTOR
Name SWICK, CANDY
Address 7661 COVE TERRACE
City-State-Zip: SARASOTA FL 34231

Title TREASURER
Name STAIKOS, GILLIAN L
Address 7436 MYRICA DR
City-State-Zip: SARASOTA FL 34241

Title TRUSTEE
Name CORREDOR, TANIA
Address 3843 VIRGA BLVD
City-State-Zip: SARASOTA FL 34233

Title TRUSTEE
Name CARTER, CLARE
Address 4717 EAST TRAIS DR.
City-State-Zip: SARASOTA FL 34232

Title TRUSTEE
Name BABCOCK, ANN MOORE
Address P.O. BOX 66526
City-State-Zip: HOUSTON TX 77266

Title TRUSTEE
Name CURRAN, PATRICIA MANSON
Address 501 HABEN BLVD. #1003
City-State-Zip: PALMETTO FL 34221

Title TRUSTEE
Name STAIKOS, MELISSA
Address 7436 MYRICA DRIVE
City-State-Zip: SARASOTA FL 34241

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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: GILLIAN L STAIKOS

TREASURER

02/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	EXECUTIVE DIRECTOR
Name	FRANCIOSI, TIFFANY
Address	2239 WELLS AVE
City-State-Zip:	SARASOTA FL 34232