

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001586

Entity Name: FACE_OF_HOPE FOUNDATION INC.

Current Principal Place of Business:

13600 TAMIAMI TRAIL
NORTH PORT, FL 34287

FILED
Apr 19, 2016
Secretary of State
CC3436096444

Current Mailing Address:

FACE_OF_HOPE FOUNDATION INC.,
13600 TAMIAMI TRAIL
NORTH PORT, FL 34287 US

FEI Number: 27-1916249

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GORE, EVELYN
13600 TAMIAMI TRAIL
NORTH PORT, FL 34287 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 BOARD CHAIRMAN
Name MCCLELAND, LYNETTE E
Address 4730 HERON DRIVE
City-State-Zip: VENICE FL 34293

Title TREASURER
Name POMERANZ, FRANKLIN G
Address 13624 TAMIAMI TRAIL #168
City-State-Zip: NORTH PORT FL 34287

Title PRESIDENT, CEO
Name GORE, EVELYN
Address 20129 LAGENTE CIRCLE
City-State-Zip: VENICE FL 34293

Title ADVISOR
Name MORGULIS, MIKHAIL DR
Address 12362 HERNANADO RD
City-State-Zip: NORTH PORT FL 34287

Title VC
Name DEWITH, MYANE DR
Address 6001 NORTH LARKSPUR WAY
City-State-Zip: BEVERLY HILLS FL 34465

Title SECRETARY
Name SUNDAY, PATRICIA A DR.
Address 4027 C BALLARD ROAD
City-State-Zip: TALLAHASSEE FL 32305

Title ADVISOR
Name GLOVER, KOFI R DR.
Address 15003 MORNING DRIVE
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name BACA, BETTY JO
Address 17304 TERRY AVE
City-State-Zip: PORT CHARLOTTE FL 33948

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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: EVELYN GORE

PRESIDENT CEO

04/19/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FULLER, COLLEEN
Address 1796 BOCA RATON COURT
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name CROWLEY, JOY
Address 13624 TAMIAMI TRAIL
City-State-Zip: NORTH PORT FL 34287

Title DIRECTOR
Name WEBBER, TERENCE
Address 20061 GALLERIA BLVD
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name SANDERS, ERIC
Address 2166 INNER CASS CIRLCE
City-State-Zip: SARASOTA FL 34231