## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001586

Entity Name: FACE OF HOPE FOUNDATION INC.

**FILED** Feb 13, 2024 **Secretary of State** 2863838971CC

## **Current Principal Place of Business:**

2271 MISSION VALLEY BLVD NOKOMIS. FL 34275

## **Current Mailing Address:**

2271 MISSION VALLEY BLVD NOKOMIS. FL 34275 US

FEI Number: 27-1916249 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

GORE, EVELYN 2271 MISSION VALLEY BLVD NOKOMIS, FL 34275 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: EVELYN GORE 02/13/2024

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **BOARD CHAIRMAN** Title **SECRETARY** HUGHETT, MINDY SLABA, OKSANA Name Name 1331 43RD ST 3283 BENEVA RD Address Address

**UNIT 202** 

**TREASURER** 

SARASOTA FL 34234 City-State-Zip: City-State-Zip: SARASOTA FL 34232

Title PRESIDENT, CEO Title

Name GORE, EVELYN Name DAVIDSON, LESLIE Address 2271 MISSION VALLEY BLVD 3195 VIRGINIA ROAD Address

City-State-Zip: NOKOMIS FL 34275 VENICE FL 34293

City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR** 

WEBBER, TERENCE Name Name VILA. MAITE

19368 NEARPOINT DRIVE Address Address 2824 ALGARDI LN

City-State-Zip: VENICE FL 34292 City-State-Zip: NORTH PORT FL 34286

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.

02/13/2024 SIGNATURE: EVELYN GORE PRESIDENT / CEO

Date