

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010834

Entity Name: HOPE FOR HUMANITY WORLDWIDE, INC.**Current Principal Place of Business:**6001 N FALLS CIRCLE DRIVE
#401
LAUDERHILL, FL 33319**Current Mailing Address:**P.O. BOX 450391
SUNRISE, FL 33345 US**FEI Number:** 45-3998534**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, RHONDA
6001 N FALLS CIRCLE DRIVE
#401
LAUDERHILL, FL 33319 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:** RHONDA SMITH**04/26/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PETERS, KERRY-ANN
Address P.O. BOX 450391
City-State-Zip: SUNRISE FL 33345

Title TREASURER
Name MURDOCK, ELSADA
Address P.O. BOX 450391
City-State-Zip: SUNRISE FL 33345

Title SECRETARY
Name MCFARLANE, MARCIA
Address P.O. BOX 450391
City-State-Zip: SUNRISE FL 33345

Title DIRECTOR
Name DAWKINS, DONALD
Address P.O. BOX 450391
City-State-Zip: SUNRISE FL 33345

Title DIRECTOR
Name SMITH, RHONDA
Address P.O. BOX 450391
City-State-Zip: SUNRISE FL 33345

Title DIRECTOR
Name BRYAN, ALMA
Address P.O. BOX 450391
City-State-Zip: SUNRISE FL 33345

Title DIRECTOR
Name PEART, WINSTON
Address P.O. BOX 450391
City-State-Zip: SUNRISE FL 33345

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: RHONDA SMITH**DIRECTOR****04/26/2017**

Electronic Signature of Signing Officer/Director Detail

Date