

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000001028

**Entity Name:** MOMS WITH HOPE FOUNDATION, INC.

**Current Principal Place of Business:**

318 ALHAMBRA CIR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

318 ALHAMBRA CIR  
CORAL GABLES, FL 33134

**FEI Number:** 45-4433931

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ATRIUM REGISTERED AGENTS, INC.  
8950 SOUTHWEST 74TH COURT  
SUITE 1901  
MIAMI, FL 33156 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 D  
Name DEWHURST, MYRA  
Address 318 ALHAMBRA CIR  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name LUONGO, THOMAS A  
Address 318 ALHAMBRA CIR  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name KENDALL, M. ELENA  
Address 318 ALHAMBRA CIR  
City-State-Zip: CORAL GABLES FL 33134

*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:** M. ELENA KENDALL

D

02/20/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date