

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010557

**Entity Name:** RENEW HOPE COUNSELING CENTER, INC.

**Current Principal Place of Business:**

703 FAWN RIDGE DRIVE  
ORANGE CITY, FL 32763

**Current Mailing Address:**

703 FAWN RIDGE DRIVE  
ORANGE CITY, FL 32763 US

**FEI Number:** 46-1532321

**Certificate of Status Desired:** Yes

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

EDDY, LISA  
703 FAWN RIDGE DRIVE  
ORANGE CITY, FL 32763 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            PRESIDENT, CHAIRMAN  
Name            EDDY, LISA  
Address        703 FAWN RIDGE DRIVE  
City-State-Zip: ORANGE CITY FL 32763

Title            CEO  
Name            EDDY, LISA  
Address        703 FAWN RIDGE DRIVE  
City-State-Zip: ORANGE CITY FL 32763

*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:** LISA M. EDDY, MS, LMHC

**PRESIDENT**

**03/19/2020**

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

\_\_\_\_\_  
Date