

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

DOCUMENT# N14000005741

**Entity Name:** FEEDING WITH HOPE, INC.**Current Principal Place of Business:**217 E. AZTEC AVE  
CLEWISTON, FL 33440**Current Mailing Address:**334 LOPEZ PL  
CLEWISTON, FL 33440 US**FEI Number: 46-5725494****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**POSADAS CRUZ, JAVIER O  
217 E. AZTEC AVE  
CLEWISTON, FL 33440 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, CEO
Name	POSADAS, HEIDY O
Address	1029 BAYBERRY LOOP
City-State-Zip:	CLEWISTON FL 33440

Title	VP
Name	RODRIGUEZ, ZULLY
Address	5806 COLDWATER CYN # 6
City-State-Zip:	VALLEY VILLAGE CA 91607

Title	TREASURER
Name	POSADAS, JAVIER
Address	8070 WEST RUSSELL RD 1077
City-State-Zip:	LAS VEGAS FL 89113

Title	SECRETARY
Name	CERDA, YOLANDA
Address	861 TWIN LAKES
City-State-Zip:	CLEWISTON FL 33440

Title	DIRECTOR
Name	CHAIRES, CARMEN
Address	820 HOLLY DR LOT # 44
City-State-Zip:	CLEWISTON FL 33440

*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: HEIDY POSADAS****PRESIDENT****05/22/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date