

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000010587

**Entity Name:** RESTORING HOPE APOSTOLIC MINISTRIES, INC.

**Current Principal Place of Business:**

2370 MESSENGER CIRCLE  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

2370 MESSENGER CIRCLE  
SAFETY HARBOR, FL 34695

**FEI Number: 87-2515284**

**Certificate of Status Desired: Yes**

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

TOY, THOMAS  
2370 MESSENGER CIRCLE  
SAFETY HARBOR, FL 34695 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 P  
Name TOY, THOMAS  
Address 2370 MESSENGER CIRCLE  
City-State-Zip: SAFETY HARBOR FL 34695

Title VP  
Name TOY, ANNETTE M  
Address 2370 MESSENGER CIRCLE  
City-State-Zip: SAFETY HARBOR FL 34695

Title TREASURER  
Name PEREZ, RACHEL  
Address 4797 26TH AVE NORTH  
City-State-Zip: ST. PETERSBURG FL 33713

Title SECRETARY  
Name PEREZ, AL  
Address 4797 26TH AVE NORTH  
City-State-Zip: ST. PETERSBURG FL 33713

Title ASST. SECRETARY  
Name SPENCE, CYDA  
Address 1919 BAYSHORE COURT  
City-State-Zip: SAFETY HARBOR FL 34695

Title CORRESPONDING SECRETARY  
Name SANTOS, JULIE  
Address 2370 MESSENGER CIRCLE  
City-State-Zip: SAFETY HARBOR FL 34695

Title PASTOR  
Name PEREZ, VICTOR  
Address 2370 MESSENGER CIRCLE  
City-State-Zip: SAFETY HARBOR FL 34695

*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: THOMAS TOY**

**PRESIDENT**

**03/19/2024**

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

\_\_\_\_\_  
Date