

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22452

FILED
Mar 08, 2016
Secretary of State
CC5073215827

Entity Name: STAR OF HOPE INTERNATIONAL, AMERICA, INC.

Current Principal Place of Business:

13 N MAIN ST LOWER LEVEL
ELLINWOOD, KS 67526

Current Mailing Address:

PO BOX 427
ELLINWOOD, KS 67526 US

FEI Number: 59-2844916

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRICK, WILLIAM WATSON
1216 E ATLANTIC BLVD SUITE 7
POMPANO BEACH, FL 33060 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 DIRECTOR
Name BORROR, KENNETH W
Address 1130 BECKY DR
City-State-Zip: COLORADO SPRINGS CO 80921

Title DIRECTOR
Name ERIKSSON, LENNART
Address 13 N MAIN ST UPPER LEVEL
City-State-Zip: ELLINWOOD KS 67526

Title CEO
Name PRESSON, MARK
Address PO BOX 427
City-State-Zip: ELLINWOOD KS 67526

Title SECRETARY
Name CARSON, DENNIS
Address 620 N SCHILLER AV
City-State-Zip: ELLINWOOD KS 67526

Title DIRECTOR, CHAIRMAN
Name WILLIAMS, DONALD
Address 13 N MAIN ST LOWER LEVEL
City-State-Zip: ELLINWOOD KS 67526

Title DIRECTOR
Name METSGER, KAY
Address 13 N MAIN ST LOWER LEVEL
City-State-Zip: ELLINWOOD KS 67526

Title DIRECTOR, TREASURER
Name PRESCOTT, JON
Address 13 N MAIN ST LOWER LEVEL
City-State-Zip: ELLINWOOD KS 67526

Title DIRECTOR
Name HUFF, KEVIN
Address 13 N MAIN ST
City-State-Zip: ELLINWOOD KS 67526

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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: MARK J PRESSON

CEO

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KALLIN, ULRIKA
Address 13 N MAIN
City-State-Zip: ELLINWOOD KS 67526

Title DIRECTOR
Name RODICA, MALLOS
Address 13 N MAIN
City-State-Zip: ELLINWOOD KS 67526