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	ANTON HOPEN			01/20/2023	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	VP	Title	PD		
Name	HOPEN, LISA	Name	HOPEN, ANTON		
Address	180 PINE AVENUE NORTH	Address	180 PINE AVENUE NORTH		
City-State-Zip:	OLDSMAR FL 34677	City-State-Zip:	OLDSMAR FL 34677		

Current Mailing Address:

DOCUMENT# P0000002905

Entity Name: HOPEN CORPORATION

Current Principal Place of Business:

180 PINE AVE. NORTH OLDSMAR. FL 34677

180 PINE AVE. NORTH OLDSMAR, FL 34677

FEI Number: 59-3619812

Name and Address of Current Registered Agent:

SMITH & HOPEN PA SMITH & HOPEN, P.A. **180 PINE AVENUE NORTH** OLDSMAR, FL 34677 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PD

SIGNATURE: ANTON HOPE	N
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Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

01/20/2023

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT