

**2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P40979

**FILED**  
**Apr 23, 2021**  
**Secretary of State**  
**2816566338CC**

**Entity Name:** CITY OF HOPE, A NONPROFIT CORPORATION

**Current Principal Place of Business:**

1500 EAST DUARTE ROAD  
DUARTE, CA 91010

**Current Mailing Address:**

ATTN: TAX & LICENSING  
1500 E. DUARTE RD  
DUARTE, CA 91010 US

**FEI Number:** 95-3435919

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           TREASURER AND CFO  
Name           PARKHURST, JENNIFER  
Address        1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title           SECRETARY  
Name           SCHETINA, GREGORY D  
Address        1500 E. DUARTE RD.  
City-State-Zip: LOS ANGELES CA 90017

Title           DIRECTOR  
Name           CLINTON, MALISSIA J  
Address        1500 EAST DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title           PRESIDENT, CEO  
Name           STONE, ROBERT  
Address        1500 E. DUARTE RD.  
City-State-Zip: DUARTE CA 91010

Title           DIRECTOR  
Name           PAYSON, NORMAN  
Address        1500 EAST DUARTE RD  
City-State-Zip: DUARTE FL 91010

Title           DIRECTOR  
Name           SARGENT, RONALD  
Address        1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title           DIRECTOR  
Name           STEELE, GLENN  
Address        1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title           DIRECTOR  
Name           POST, WILLIAM  
Address        1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

**Continues on page 2**

*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:** JENNIFER PARKHURST

**CFO**

**04/23/2021**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BRUSER, BARBARA  
Address 1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title DIRECTOR  
Name BEATTY, RANDOLPH  
Address 1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title DIRECTOR  
Name ISAKOW, SELWYN  
Address 1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title ASSISTANT SECRETARY  
Name WALKER, JEFFREY  
Address 1500 EAST DUARTE ROAD  
City-State-Zip: DUARTE CA 91010

Title DIRECTOR  
Name FASANO, PHILIP  
Address 1500 EAST DUARTE ROAD  
City-State-Zip: DUARTE CA 91010

Title DIRECTOR  
Name FINK, STEVEN  
Address 1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title DIRECTOR  
Name CHU, MORGAN  
Address 1500 E. DUARTE RD  
City-State-Zip: DUARTE CA 91010

Title ASSISTANT SECRETARY  
Name BERTELL, KRISTIN  
Address 1500 EAST DUARTE ROAD  
City-State-Zip: DUARTE CA 91010

Title ASSISTANT TREASURER  
Name MATTEWSON, DONALD  
Address 1500 EAST DUARTE ROAD  
City-State-Zip: DUARTE CA 91010

Title DIRECTOR  
Name VAUTRINOT, SUZANNE  
Address 1500 EAST DUARTE ROAD  
City-State-Zip: DUARTE CA 91010