

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 281024

Entity Name: GOOD HOPE, INC.

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

435 S RIDGEWOOD AVE
#210
DAYTONA BEACH, FL 32115 US

Current Mailing Address:

435 S. RIDGEWOOD AVE.
#210
DAYTONA BEACH, FL 32114

New Principal Place of Business:

435 S RIDGEWOOD AVE
#210
DAYTONA BEACH, FL 32114 US

New Mailing Address:

435 S. RIDGEWOOD AVE.
#210
DAYTONA BEACH, FL 32114 US

FEI Number: 59-1088201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELUS, ALLEN M
435 S RIDGEWOOD AVE
#210
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

MARDIKOS, JAMES
36 BELMONT PL
STATEN ISLAND, FL 10301 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: JAMES MARDIKOS

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARDIKOS, NICHOLAS,
Address: 5 FORT HILL CIRCLE
City-St-Zip: STATEN ISLAND, NY

Title: D () Delete
Name: MARDIKOS, THEODOSI,
Address: 865 FOREST AVENUE
City-St-Zip: STATEN ISLAND, NY

Title: PST () Delete
Name: MARDIKOS, JAMES,
Address: 36 BELMONT AVENUE
City-St-Zip: STATEN ISLAND, NY.,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARDIKOS, NICHOLAS,
Address: 5 FORT HILL CIRCLE
City-St-Zip: STATEN ISLAND, NY 10301 US

Title: D (X) Change () Addition
Name: MARDIKOS, THEODOSI,
Address: 865 FOREST AVENUE
City-St-Zip: STATEN ISLAND, NY 10301 US

Title: PST (X) Change () Addition
Name: MARDIKOS, JAMES,
Address: 36 BELMONT AVENUE
City-St-Zip: STATEN ISLAND, NY 10301 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES MARDIKOS

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date