

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738762

FILED
Mar 10, 2006
Secretary of State

Entity Name: NEW HOPE FOR KIDS, INC.

Current Principal Place of Business:

205 EAST SR 436
SUITE D
CASSELBERRY, FL 32730

New Principal Place of Business:

Current Mailing Address:

205 EAST SR 436
SUITE D
CASSELBERRY, FL 32730

New Mailing Address:

FEI Number: 59-1791345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

A.G. CO.
200 SOUTH ORANGE AVE. SUITE 2300
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILSON, PETER
Address: 300 S LAKE DESTINY DRIVE
City-St-Zip: ORLANDO, FL 32802

Title: C () Delete
Name: MCEACHROR, ANDREW
Address: 135 W SWOOP AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: HOMAYSSI, RUBY
Address: 1409 PYLEWOOD STREET
City-St-Zip: FERN PARK, FL 32730

Title: D () Delete
Name: GRUBER, BRIAN
Address: 707 MENDHAM BLVD., SUITE 200
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: FORD, ANNETTE
Address: 696 E. ALTAMONTE DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ARKIN, J. GORDON
Address: 111 N. ORANGE AVE. 18TH FLOOR
City-St-Zip: ORLANDO, FL 32802

Title: C (X) Change () Addition
Name: FERNANDEZ, LAURA
Address: 633 N. ORANGE AVE MAILPOINT 159
City-St-Zip: ORLANDO, FL 32801

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR () Change (X) Addition
Name: SOLLACCIO, JOE
Address: 633 N. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVE JOSWICK

EXEC

03/10/2006

Electronic Signature of Signing Officer or Director

Date