

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750901

FILED
Mar 02, 2011
Secretary of State

Entity Name: HOPE FAMILY SERVICES, INC.

Current Principal Place of Business:

3215 9TH STREET WEST
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1624
BRADENTON, FL 34206

New Mailing Address:

FEI Number: 59-1970241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LYNCH, LAUREL A ED
3215 9TH STREET WEST
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

LYNCH, LAUREL A CEO
3215 9TH STREET WEST
BRADENTON, FL 34205 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: LAUREL A. LYNCH

03/02/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FRIEDRICH, DANIEL
Address: PO BOX 1624
City-St-Zip: BRADENTON, FL 34206

Title: VP
Name: DOUGHERTY SLAPP, MARY
Address: PO BOX 1624
City-St-Zip: BRADENTON, FL 34206

Title: D
Name: FISHER, ROSEMARIE
Address: PO BOX 1624
City-St-Zip: BRADENTON, FL 34206

Title: TD
Name: SALISBURY, THOMAS
Address: PO BOX 1624
City-St-Zip: BRADENTON, FL 34206

Title: D
Name: O'KEEFE, MICHAEL
Address: PO BOX 1624
City-St-Zip: BRADENTON, FL 34206

Title: D
Name: BENNETT, DEE
Address: PO BOX 1624
City-St-Zip: BRADENTON, FL 34206

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: LAUREL A. LYNCH

CEO

03/02/2011

Electronic Signature of Signing Officer or Director

Date