2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# F04000001329

Entity Name: THE GARDEN OF HOPE AND COURAGE, INC.

Current Principal Place of Business:

2947 BELLFLOWER LANE
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

2947 BELLFLOWER LANE
NAPLES, FL 34105

New Mailing Address:

FEI Number: 41-1793877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DALTON, WILLIAM
2947 BELLFLOWER LANE
NAPLES, FL 34105 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: CP ( ) Delete
Name: D'AMICO, RICHARD
Address: 211 NORTH FIRST STREET
City-St-Zip: MINNEAPOLIS, MN 55410

Title: VCVP ( ) Delete
Name: D'AMICO, BUNNY
Address: 2035 KENWOOD PARKWAY
City-St-Zip: MINNEAPOLIS, MN 55401

Title: DT ( ) Delete
Name: DALTON, WILLIAM
Address: 2947 BELLFLOWER LANE
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete
Name: DALTON, SUSAN
Address: 2947 BELLFLOWER LANE
City-St-Zip: NAPLES, FL 34105

Title: S ( ) Delete
Name: WALKER, COLLEEN
Address: 4212 BURTON ROAD
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

SIGNATURE: COLLEEN WALKER S 01/07/2008
Electronic Signature of Signing Officer or Director — Date