F0500001505

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Non-profit
WW5-9917





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FILED 59

A M

TRANSMITTAL LETTER

Qualification/Registration Section

Division of Corporations

TO:

SUBJECT:	Hope And	CARE I	ntervatinaL rporation)	Inc.
		(Name of Co	rporation)	
Dear Sir or Mada	am:			
its Affairs in Flo	rida", "Certificat	e of Existence",	ofit Corporation for Auth and check are submitted its affairs in Florida.	
Please return all	correspondence	concerning this	matter to the following:	
Rever	end Dansi	Name of	lle Person)	
Ho	pe And C	ARE INTO	er NA+TONAL	
	1	(Firm/Con	npany)	
yo 883	Livingst	on Loop		
	J	(Addre	ess)	
The 1	lillages,	Florida	32162_ IZip Code)	5 -
	,	(City, State and	Zip Code)	<u>-</u> <u>-</u> <u>-</u>
For further inform	nation concernin	g this matter, pl	ease call:	ED FN 12: 59
JANICE S (Name of Pers	windle	at (35d) 205 Area Code & Daytime Te	
STREET ADDR Qualification/Tax Division of Corp 409 E. Gaines St.	RESS: (Lien Section orations		MAILING ADDRES Qualification/Tax Lier Division of Corporation P. O. Box 6327	S: 1 Section
Tallahassee, FL			Tallahassee, FL 3231	4
Enclosed is a che	ck for the follow	ring amount:		
□ \$70.00 Filing		Filing Fee & (cate of Status	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 21, 2005

REVEREND JANICE SWINDLE HOPE AND CARE INTERNATIONAL 883 LIVINGSTON LOOP THE VILLAGES, FL 32162

SUBJECT: HOPE AND CARE INTERNATIONAL INCORPORATED

Ref. Number: W05000008917

We have received your document for HOPE AND CARE INTERNATIONAL INCORPORATED and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 205A00012028

FILEU

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1.	Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or
	(Name of corporation: must include the word "INCORPORATED" of "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2.	FLLswois 3. 36-3776486 (State or country under the law of which (FEI number, if applicable)
	it is incorporated)
4.	Date of Incorporation) 5. Dec Det u Al (Duration! Year corp. will cease to exist or
	"perpetual")
6.	(Date corporation first conducted Affairs in Florida - Have not even opened A BANK Account See sections 617.1501, 617.1502, and 817.155, F.S.) yet.
7.	90883 Livingston Loop
	The Villages, Florida (Current mailing address)
8.	The ARE AN JW ternational Mission Ary Outreach (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent:
	Name and street address of Florida registered agent: Rev. Janta Swindle (Name) Clo 883 Livingston Loop J (Office address)
	Charles I day
	Clo 883 Livingston Loop 55
	The Villages, Florida, 32162 (City) (City)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)A. DIRECTORS (Street address only- P. O. Box NOT acceptable)
Chairman:
Address:
Vice Chairman:
Address:
Director: Dennis Roop JR.
Address: 1/2 Brachuen Road- Montgomery, IL 60538
Director: JANIS PATGE Chandlen
Director: JANIS PATGE Chandler Address: 5174 W. PARK AVE. p.o. BOK 694- SheridAN, IL 60551
D. OFFICEDC (Street address only D. O. Borr MOT acceptable)
B. OFFICERS (Street address only- P. O. Box NOT acceptable)
Address: 783 Liver Star / 201/
The Willer of Harila 32162
Vice President:
B. OFFICERS (Street address only-P. O. Box NOT acceptable) President: Janice Irene Swindle Address: 883 Livingston Loop The Villages, Horida 32162 Vice President: Address:
Secretary: Richard Chandler
Secretary: Kichard Chardler Address: 5173 W. park Avenue - p.o. Box 694 Sheridar, IL 60551 (deliver will
Treasurer: Richard Chandler
Address: Same A Above
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
(Typed or printed name and capacity of person signing application)

2-11-05

Addendum: Hope And Care Int'l Officers

Director - William C. Swindle

409 Brookhaven Circle Sugar Grove, Il 60554

05 MAR -9 PM 12: 59

File Number

5629-798-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of

MARCH

A.D.

2005

Desse White

SECRETARY OF STATE