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09/13/05--01053--001 \*\*70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2005 OCT -1 P 3:05

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Completed 10/14/05

## TRANSMITTAL LETTER

**TO:** Qualification/Registration Section  
Division of Corporations

**SUBJECT:** HOPE PRISON MINISTRIES  
(Name of Corporation)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

William B. Fay  
(Name of Person)

12601 Villagio Way  
(Address)

Ft Meyers, FL 33912  
(City, State and Zip Code)

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2005 OCT -7 P 3:05  
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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

William Fay at (239) 939-9642  
(Name of Person) Area Code & Daytime Telephone Number

**STREET ADDRESS:**  
Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Qualification/Tax Lien Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate 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

September 28, 2005

WILLIAM B. FAY  
12601 VILLAGIO WAY  
FT MYERS, FL 33912

SUBJECT: HOPE PRISON MINISTRIES INCORPORATED  
Ref. Number: W05000044758

We have received your document for HOPE PRISON MINISTRIES INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to submit the second page of the application. Please complete the attached.

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) 245-6913.

Diane Cushing  
Document Specialist

Letter Number: 305A00059101

**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. HOPE PRISON MINISTRIES INCORPORATED  
(Name of corporation: must include the word "INCORPORATED" or "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. COLOMBIA 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/14/83 5. PERPETUAL  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 9/2/05  
(Date corporation first conducted Affairs in Florida -  
See sections 617.1501, 617.1502, and 817.155, F.S.)

7. 12601 VILLAGIO WAY  
FT. MYERS, FL. 33912  
(Current mailing address)

8. MINISTER TO PRISONS AND CHURCHES  
(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:

William B. Fay  
(Name)

12601 VILLAGIO WAY  
(Office address)

FT. MYERS, Florida, 33912  
(City) (Zip Code)

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.

William B. Fay  
(Registered agent's signature)

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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: William Fay

Address: 12601 VILLANO

FT MYERS FL 33912

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: DR PAUL GRANT

Address: 5195 S. KENTON WAY

ENGLEWOOD, CO 80111

Vice President: KATHIE GRANT

Address: 5195 S. KENTON WAY

ENGLEWOOD CO 80111

Secretary: MARGARET FAY

Address: 12601 VILLANO WAY

Treasurer: FT MYERS FL 33912

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. William B. Fay

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William B. Fay Director

(Typed or printed name and capacity of person signing application)

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2005 OCT -7 P 3:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE**

I, William A. Hobbs, as the Deputy Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

HOPE PRISON MINISTRIES

is a

Nonprofit Corporation

formed or registered on 12/13/1983 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19871549229 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 09/02/2005 that have been posted, and by documents delivered to this office electronically through 09/08/2005 @ 11:48:54 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 09/08/2005 @ 11:48:54 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 6299262 .



FILED  
OCT - 7 P 3:05  
SECRETARY OF STATE  
DENVER, COLORADO

Deputy Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, click Business Center and select "Frequently Asked Questions."*