

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002042

FILED  
Jun 16, 2010  
Secretary of State

**Entity Name:** KRISTIN BROOKS HOPE CENTER INC.

**Current Principal Place of Business:**

1250 24TH ST NW  
SUITE 300  
WASHINGTON, DC 20037

**New Principal Place of Business:**

**Current Mailing Address:**

1250 24TH ST NW  
SUITE 300  
WASHINGTON, DC 20037

**New Mailing Address:**

**FEI Number:** 68-0342550      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GREGG, PAUL  
634 LOWER 8TH AVE. SOUTH  
JACKSONVILLE, FL 32250 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: T  
Name: ROSSELL, RICHARD  
Address: 1250 24TH STREET NW SUITE 300  
City-St-Zip: WASHINGTON, DC 20037

Title: VCP  
Name: BUTLER, REESE  
Address: 2628 CECIL DR  
City-St-Zip: CHESTER, MD 21619

Title: DVP  
Name: KAHN, AIKO  
Address: 1250 24TH STREET NW SUITE 300  
City-St-Zip: WASHINGTON, DC 20037

Title: DS  
Name: STROM, ROBERT  
Address: 1250 24TH STREET NW SUITE 300  
City-St-Zip: WASHINGTON, DC 20037

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: H. REESE BUTLER II

VCP

06/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date