SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 31 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L83263** (8)

1. Corporation Name
HOPE VENTURES, INCORPORATED

Principal Place of Business	Mailing Address
2715 N HARBOR CITY BLVD STE 1 MELBOURNE FL 32935 US	2715 N HARBOR CITY BLVD STE 1 MELBOURNE FL 32935 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/26/1990
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21: 1700 W. New Haven Ave
Suite, Apt. #, etc. 22: 981-K
City & State 23: Melbourne, FL
Zip 24: 32904 Country 25: Brevard

2a. Mailing Address
26: 1790 Goldfinch Ct.
Suite, Apt. #, etc. 27:
City & State 28: Melbourne, FL
Zip 29: 32935 Country 30: Brevard

4. FEI Number: 59-3018151 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

RENFRO, RICHARD M
1790 GOLDFINCH CT
MELBOURNE FL 32935

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] Pres. Richard M. Renfro, Pres 6/1/95
Signature, typed & printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	11 TITLE	☐ Change ☐ Addition
NAME	RENFRO, RICHARD M	12 NAME	
STREET ADDRESS	1790 GOLDFINCH CT	13 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32935	14 CITY-ST-ZIP	32935
TITLE	D	21 TITLE	D RENFRO, ROBERT M ☐ Change ☐ Addition
NAME	RENTRO, ROBERT M	22 NAME	
STREET ADDRESS	435 MYRTLEWOOD RD	23 STREET ADDRESS	435 MYRTLEWOOD RD
CITY-ST-ZIP	MELBOURNE FL 32941	24 CITY-ST-ZIP	MELBOURNE, FL 32941
TITLE	VD	31 TITLE	☐ Change ☐ Addition
NAME	RENFRO, SUSHILA S	32 NAME	
STREET ADDRESS	1790 GOLDFINCH CT	33 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32935	34 CITY-ST-ZIP	32935
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	RENFRO, MARY	42 NAME	
STREET ADDRESS	435 MYRTLEWOOD RD	43 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32941	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☒ Change ☐ Addition
NAME	RENFRO, MARY R.	52 NAME	
STREET ADDRESS	435 MYRTLEWOOD ROAD	53 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Richard M. Renfro Pres 6/1/95 407-725-9808
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0010766 CP