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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M49231** (7)

1. Corporation Name

FUTURE HOPES, INC.



Principal Place of Business

**306 N. HIGHLANDS DRIVE
HOLLYWOOD FL 33021**

Mailing Address

**306 N. HIGHLANDS DRIVE
HOLLYWOOD FL 33021**

3. Date Incorporated or Qualified

03/27/1987

3a. Date of Last Report

06/16/1995

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

29 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BOLTON, RICHARD A. ESQ.
190 IVES DAIRY ROAD
SUITE #206
NORTH MIAMI FL 33179**

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 officer 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 for principal place of business and first appointment)

(Signature for Registered Agent (signature required when re-stating))

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

**HICKS, RAYMOND
306 N. HIGHLANDS DR.
HOLLYWOOD FL**

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

V

**WOOD-BOLTON, NANCY RAE
11900 GRIFFING BLVD
BISCAYNE PARK FL**

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

S

**HICKS, KATHY
306 N. HIGHLANDS DR.
HOLLYWOOD FL**

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

T

**BOLTON, RICHARD A.
11900 GRIFFING BLVD
BISCAYNE PARK FL**

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ Change ☐ Addition

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)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

REGISTERED OFFICER'S #

CR2E034 (12/95)