

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 02, 2001 8:00 am**  
**Secretary of State**

04-24-2001 90337 044 \*\*\*\*61.25

**DOCUMENT # N00000002486**

1. Entity Name

FOUNTAIN OF HOPE, INC.

Principal Place of Business

4 NORTH EUSTIS STREET  
 EUSTIS FL 32726

Mailing Address

4 NORTH EUSTIS STREET  
 EUSTIS FL 32726

2. Principal Place of Business

119 N Center St  
 Eustis FL

3. Mailing Address

119 N Center St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Eustis FL

City & State

Eustis FL

4. FEI Number

59-3715468

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

Zip  
 32726

Country  
 Lake

Zip  
 32726

Country  
 Lake

6. Name and Address of Current Registered Agent

AUDAIN, FED  
 4 NORTH EUSTIS STREET  
 EUSTIS FL 32726

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

119 N Center St

City Eustis

FL

Zip Code  
 32726

8. 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

*Fed Audain*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	CANTHER, DAVID	
STREET ADDRESS	9285 SILVER LAKE DR	
CITY - ST - ZIP	LEESBURG FL 34788	
TITLE	D	<input type="checkbox"/> Delete
NAME	COE, MICHAEL	
STREET ADDRESS	8012 PINE HOLLOW DR	
CITY - ST - ZIP	MT DORA FL 32757	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PHILLIPS, HAROLD	
STREET ADDRESS	1101 NORTH TALCESHIRE BLVD	
CITY - ST - ZIP	HOWEY IN THE HILLS FL 34737	
TITLE	D	<input type="checkbox"/> Delete
NAME	AUDAIN, FED	
STREET ADDRESS	19214 SALTS DALE RD	
CITY - ST - ZIP	UMATILLA FL 32784	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like employees.

SIGNATURE:

*Fed Audain*

352 483-7620