

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004942

FILED
May 01, 2006
Secretary of State

Entity Name: H.O.P.E. HUMAN RESOURCE DEVELOPMENT, INC.

Current Principal Place of Business:

2305 SHERIDAN STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

2305 SHERIDAN STREET
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 65-1027577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CONEY, LATONYA
2301 SHERIDAN ST.
HOLLYWOOD, FL 33020 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: D () Delete
Name: JOHNSON, CONNAIL
Address: 2240 NW 171ST TERRACE
City-St-Zip: CAROL CITY, FL 33156

Title: P () Delete
Name: JOHNSON, PATRICIA S
Address: 2301 SHERIDAN ST.
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: KING, FAYE
Address: 2301 SHERIDAN ST.
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: GRAHAM, TERESA
Address: 2301 SHERIDAN ST.
City-St-Zip: HOLLYWOOD, FL 33020

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JOHNSON, PATRICIA S
Address: 2301 SHERIDAN ST.
City-St-Zip: HOLLYWOOD, FL 33020

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: WILSON, CECELIA
Address: 2301 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Change (X) Addition
Name: BASS, BETTIE
Address: 2301 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33020

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA S. JOHNSON

ED

05/01/2006

Electronic Signature of Signing Officer or Director

Date