


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb-01, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000005518 1. Entity Name HOPE PROPERTIES, INC.	
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Principal Place of Business 1550 ORANGE BLOSSOM TRAIL PALM BAY, FL 32905	Mailing Address 1550 ORANGE BLOSSOM TRAIL PALM BAY, FL 32905
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01032006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3663559 Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

6. Name and Address of Current Registered Agent GILBERT, JACK R 1550 ORANGE BLOSSOM TRAIL PALM BAY, FL 32905

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILBERT, JACK 1550 ORANGE BLOSSOM TRAIL, NE PALM BAY, FL 32905
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWENSON, DAN 9848 PINE ST. MICCO, FL 32976
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRIS, TERRY 1824 S HARBOR CITY BLVD MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 