

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 2002

FILED

02 OCT 23 PM 2:18

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DOCUMENT # N01000000842

1. Corporation Name

PROJECT H.O.P.E. INC.

Principal Place of Business

4545 38TH AVE
VERO BEACH FL 32967

Mailing Address

4545 38TH AVE
VERO BEACH FL 32967

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8000008344000-3

10/14/02 01007 001 \$122.50



02/19/02 90023 014 \$61.25

08/19/02 90138 013 \$61.25

4. Date Incorporated or Qualified
To Do Business in Florida

02/05/2001

5. FEI Number

59-3739693

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
Pres./Chair	Henry Burson, Jr. - "D"	4545 38TH AVE	Vero Beach, FL 32967
Treas.	David Pearson - "D"	235 Coconut Palm Rd.	Vero Beach, FL 32963
Dir.	Calman Stewart - "D"	2410 7TH CT. S.W.	Vero Beach, FL 32962
Sec.	Flossie Jackson - "D"	1315 24TH PL. S.W.	Vero Beach, FL 32962
V. Pres.	Denny Hart - "D"	4260 47TH PL.	Vero Beach, FL 32967
Dir.	Eula Clarke - "D"	1008 E. 16TH COURT	Stuart, FL 34996

8. Name and Address of Current Registered Agent

BURSON, HENRY JR. REV
4545 38TH AVE
VERO BEACH FL 32967

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

[Handwritten signature]
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10/22/02

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Handwritten signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Henry Burson, Jr.

Date

10/22/02 772-562-4325

Daytime Phone #

CR2ED40 (8/02)