## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000000901

Entity Name: HOPE LEARNING COMMUNITY OF RIVIERA BEACH, INC.

FILED Aug 06, 2004 Secretary of State

| Current Principal Place of Business:                          |  |                                     | New Princ  | New Principal Place of Business:  |  |
|---|--|-------------------------------------|--|---|--|
|   | 22ND STREET<br>EACH, FL 334                                | 04 US                               |  |   |  |
| Current Mailing Address:                                      |  |                                     | New Mailing Address:                                       |   |  |
| P O BOX 10614<br>RIVIERA BEACH, FL 334190614 US               |  |                                     |  |   |  |
| FEI Number: 65-1076887 FEI Number Applied For ( ) FEI N       |  | El Number Not Appli                 | ımber Not Applicable ( ) Certificate of Status Desired ( ) |   |  |
| Name and Address of Current Registered Agent: Na              |  |                                     |  | Address of New Registered Agent:  |  |
| JENKINS, ALLEAN<br>P.O. BOX 1080<br>PORT SALERNO, FL 34992 US |  |                                     |  |   |  |
| The above in the State  | named entity so<br>of Florida.                             | ubmits this statement for the purpo | ose of changing it   | ts registered office or registered agent, or both,  |  |
| SIGNATURE:  |  |                                     |  |   |  |
|   | Electroni  | Signature of Registered Agent       |  | Date  |  |
| OFFICERS AND DIRECTORS:                                       |  |                                     | ADDITION   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                   | D () I<br>JENKINS, ALLEA<br>P.O. BOX 1080<br>PORT SALERNO  |                                     | Title:<br>Name:<br>Address:<br>City-St-Zip:                | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                   | D () I<br>LAUNAY, JANINE<br>12432 PECONIE<br>WELLINGTON, F | COURT                               | Title:<br>Name:<br>Address:<br>City-St-Zip:                | D (X) Change ( ) Addition<br>BROWN, BRENDA<br>181 WEST 18 STREET<br>RIVIERA BEACH, FL 33404   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                   | D () I<br>BECTON, HYACI<br>500 W 24 ST<br>RIVIERA BEACH    |                                     | Title:<br>Name:<br>Address:<br>City-St-Zip:                | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                   | CW () I<br>MACK, LISA<br>2042 CROSS BF<br>WELLINGTON, F    |                                     | Title:<br>Name:<br>Address:<br>City-St-Zip:                | D (X) Change ( ) Addition<br>BARTEE, BRENDA<br>2620 WEST 28 STREET<br>RIVIERA BEACH, FL 33404 |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                   | D () I<br>OVERTON, LYNN<br>1898 BARNSTAE<br>WELLINGTON, F  | BLE ROAD                            | Title:<br>Name:<br>Address:<br>Citv-St-Zip:                | D (X) Change ( ) Addition<br>FIELDS, AARON<br>1430 WEST 27 STREET<br>RIVIERA BEACH. FL 33404  |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALLEAN JENKINS D 08/06/2004