

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000901

FILED  
Apr 28, 2011  
Secretary of State

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

**Current Principal Place of Business:**

21 WEST 22ND STREET  
RIVIERA BEACH, FL 33404 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 10614  
RIVIERA BEACH, FL 334190614 US

**New Mailing Address:**

**FEI Number:** 65-1076887

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JENKINS, ALLEAN S  
4500 S.E. FIELD STREET  
PORT SALERNO, FL 34992 US

**Name and Address of New Registered Agent:**

JENKINS, ALLEAN S  
4500 S.E. FIELD STREET  
PORT SALERNO, FL 34997 US

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:

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: O  
Name: JENKINS, ALLEAN  
Address: P.O. BOX 1080  
City-St-Zip: PORT SALERNO, FL 34992

Title: O  
Name: DURDEN, CLIFFORD H  
Address: 702 CHATELAINE BLVD  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: TROY, PERRY  
Address: 3169 OSPREY LANE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D  
Name: WILSON, DONALD  
Address: 1416 27TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D  
Name: WILLIAMS, JOHN L  
Address: 1090 27TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

I hereby 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 all other like empowered.

SIGNATURE: ALLEAN S JENKINS

O

04/28/2011

Electronic Signature of Signing Officer or Director

Date