2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2004
Secretary of State

DOCUMENT# N01000000955

Entity Name: THE H.O.P.E. OUTREACH FOUNDATION, INC.

Current Principal Place of Business:

806 WESTWIND LANE
FERN PARK, FL 32730

New Principal Place of Business:

Current Mailing Address:

PO BOX 300982
FERN PARK, FL 32730

New Mailing Address:

FEI Number: 59-8710878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JENKINS, ROBERT M DR.
806 WESTWIND LANE
FERN PARK, FL 32730 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:	P	( ) Delete
Name:	JENKINS, DR ROBERT M	
Address:	806 WESTWIND LN	
City-St-Zip:	FERN PARK, FL 32730	
Title:	V	( ) Delete
Name:	LANGSTON, DR LAWRENCE	
Address:	806 WESTWIND LANE	
City-St-Zip:	FERN PARK, FL 32730	
Title:	D	( ) Delete
Name:	SUGGS, L.R.	
Address:	806 WESTWIND LANE	
City-St-Zip:	FERN PARK, FL 32730	
Title:	D	( ) Delete
Name:	JOHNSON, LANNA	
Address:	806 WESTWIND LANE	
City-St-Zip:	FERN PARK, FL 32730	
Title:	D	( ) Delete
Name:	ANTOHIANO, ROBERT	
Address:	806 WESTWIND LAND	
City-St-Zip:	FERN PARK, FL 32730	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERT M. JENKINS P 05/02/2004

Electronic Signature of Signing Officer or Director — Date