

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2003 8:00 am
Secretary of State

09-11-2003 90083 042 ****61.25

DOCUMENT # NO1000004977

1. Entity Name

HOPE FOR THE HOMELESS MINISTRIES INC.



Principal Place of Business

**2152 9TH AVE NORTH
ST PETERSBURG FL 33713**

Mailing Address

**2152 9TH AVE NORTH
ST PETERSBURG FL 33713**

2. Principal Place of Business

2756 CENTRAL AVE

3. Mailing Address

2756 CENTRAL AVE

Suite, Apt. #, etc.

S

Suite, Apt. #, etc.

ST. PETERSBURG, FL

ST. PETERSBURG, FL

4. FEI Number **59-3731143**

Applied For
Not Applicable

Zip **33712** Country **FLORIDA**

Zip **33712** Country **FLORIDA**

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

6. Name and Address of Current Registered Agent

**RANDLETT, JOHN
1930 S MELANIE DR.
HOMOSASSA FL 34448**

7. Name and Address of New Registered Agent

Name **SAMUEL INFANZON**
Street Address (P.O. Box Number is Not Acceptable)
**3301-58th AVE. S.
APT. 509**
City **ST PETERSBURG, FL** Zip Code **33712**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September-10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	STRICKLAND, CHARLES	
STREET ADDRESS	5702 11TH STREET SOUTH	
CITY-ST-ZIP	ST PETERSBURG FL 33712	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	RANDLETT, JOHN	
STREET ADDRESS	1930 S MELANIE DR.	
CITY-ST-ZIP	HOMOSASSA FL 34448	
TITLE	VPT	<input checked="" type="checkbox"/> Delete
NAME	STRICKLAND, CHRISTINA	
STREET ADDRESS	3318 73RD ST. NORTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33710	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SAMUEL INFANZON	
STREET ADDRESS	3301-58th AVE. S. #509	
CITY-ST-ZIP	ST. PETERSBURG, FL 33712	
TITLE	SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RONALD HOSLER	
STREET ADDRESS	220-10th AVE. N.	
CITY-ST-ZIP	ST. PETERSBURG, FL 33701	
TITLE	TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARD FLECK	
STREET ADDRESS	6500 SUNSET WAY #521	
CITY-ST-ZIP	ST. PETE BEACH FL 33706	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LESTER SLONE	
STREET ADDRESS	3700-56th AV. N.	
CITY-ST-ZIP	ST. PETERSBURG, FL 33714	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS GILLIS	
STREET ADDRESS	7126-13th ST. N.	
CITY-ST-ZIP	ST. PETERSBURG, FL 33702	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE: **RICHARD FLECK** 9/9/03 (727) 360-4026

CR2E037 (4/03)