FILED
Jul 23, 2003 8:00 am
Secretary of State
04-21-2003 90345 001 ****61.25

4/2

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

55051954

DOCUMENT # N01000005184

1. Entity Name
CENTER OF HOPE, INC.

[redacted]

CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
~~15402 59TH ST~~ 15590 59th ST. N. CLEARWATER FL 33760	~~15402 59TH ST~~ 15590 59th ST. CLEARWATER FL 33760

2. Principal Place of Business	3. Mailing Address
15590 59TH ST. N	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CLEARWATER FL	City & State
Zip: 33760 Country: USA	Zip Country

4. FEI Number 26-2797046 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HENDRY, DALE G
~~15402 59TH ST~~ 15590 59th ST. N.
CLEARWATER FL 33760

7. Name and Address of New Registered Agent

Name: SAME
Street Address (P.O. Box Number is Not Acceptable):
City: FL Zip Code:

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] 4/14/03
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

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HENDRY, DALE 15402 59TH ST CLEARWATER FL 33760	☐ Delete DP	DORINDA HOLBROOK 1990 HYVUE DR. CLEARWATER FL. 33763	☐ Change ☒ Addition DIR
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDRY, VICKI 15402 59TH ST CLEARWATER FL 33760	☐ Delete DIR	SIMON WEINSTEIN 2737 ENTERPRISE RD. UNIT 1111 CLEARWATER, FL. 33759	☐ Change ☒ Addition DIR
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRAVER, WILLIAM REV 2215 4TH AVE E TAMPA FL 33605	☒ Delete	GIL DANIELS 4132 BOYD LN. PALM HARBOR FL. 34685	☐ Change ☒ Addition DIR
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAVIS, GLENN REV PO BOX 804 OLDSMAR FL 34677	☒ Delete	WILL TAYLOR 2333 FEATHER SOUND DR. #C301 CLEARWATER FL. 33762	☐ Change ☒ Addition CHAIRMAN
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PITCHON, SOL 467 BRIDLE PATH WAY TARPON SPRINGS FL 34689	☐ Delete DIR		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SADLER, CINDY REV 525 CASCADE CIR PALM HARBOR FL 34684	☒ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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: SIGNATURE REQUIRED [signature] 5/4/03 727-504-8191
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #