

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000684

FILED
Jan 04, 2008
Secretary of State

Entity Name: ART OF HOPE, INC.

Current Principal Place of Business:

2 INDEPENDENT DRIVE
SUITE 127
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

2 INDEPENDENT DRIVE
SUITE 149
JACKSONVILLE, FL 32202 US

Current Mailing Address:

1750 DIBBLE CIR. E
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: 04-3683175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KING, GEORGE
8159 ARLINGTON EXPRESSWAY
SUITE 17
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

RYALS, MARGARET S
2 INDEPENDENT DR
SUITE 149
JACKSONVILLE, FL 32202 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: MARGARET RYALS

01/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: RYALS, TONY
Address: 1750 DIBBLE CIR. E
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: DST () Delete
Name: RYALS, MARGARET
Address: 1750 DIBBLE CIR. E
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: D () Delete
Name: KING, GEORGE
Address: 8159 ARLINGTON EXPRESSWAY SUITE17
City-St-Zip: JACKSONVILLE, FL 32211 US

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARARET RYALS

CFO

01/04/2008

Electronic Signature of Signing Officer or Director

Date