

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003038

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** PORT OF HOPE MINISTRIES, INC.

**Current Principal Place of Business:**

441 ROME AVE NE  
PALM BAY, FL 329072367

**New Principal Place of Business:**

**Current Mailing Address:**

441 ROME AVE NE  
PALM BAY, FL 329072367

**New Mailing Address:**

**FEI Number:** 02-0590228

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUFRENE, PHILIP CHARLES  
441 ROME AVE NE  
PALM BAY, FL 329072367 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: PDT  
Name: DUFRENE, PHILIP C  
Address: 441 ROME AVE NE  
City-St-Zip: PALM BAY, FL 329072367 US

Title: D  
Name: MADISON, RANDY  
Address: 1640 STARFISH STREET  
City-St-Zip: KISSIMMEE, FL 347444834 US

Title: D  
Name: BAILEY, DANIEL  
Address: 600 MILLWHEEL DRIVE  
City-St-Zip: MERRITT ISLAND, FL 329524136 US

Title: D  
Name: BARLEY, DAVID  
Address: 429 ILLINOIS STREET  
City-St-Zip: ST. CLOUD, FL 347692807 US

Title: D  
Name: REEDER, WILBERT  
Address: 5100 ALLIGATOR LAKE ROAD  
City-St-Zip: SAINT CLOUD, FL 347729329 US

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: PHILIP C.DUFRENE

PDT

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date