

2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Sep 02, 2004 8:00 am
Secretary of State

09-02-2004 90077 029 ****62.00

DOCUMENT # N02000005185

1. Entity Name
LIFE & HOPE MINISTRIES, INC.



Principal Place of Business
4065 SW 40TH AVE.
PEMBROKE PARK, FL 33023

Mailing Address
4065 SW 40TH AVE.
PEMBROKE PARK, FL 33023

DO NOT WRITE IN THIS SPACE

% D , . , . , . , . , 1 - 4 1 D &

08142004 No Chg-NP

CR2E037 (10/03)

4. FEI Number
46-0495008

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

WALKER, OWEN L
7780 DILIDO BLVD.
MIRAMAR, FL 33023

**DO NOT WRITE
IN THIS SPACE**

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

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WALKER, OWEN L
7780 DILIDO BLVD.
MIRAMAR, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
WALKER, VALITI
7780 DILIDO BLVD.
MIRAMAR, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
WALKER, VENESSA ANN
7780 DILIDO BLVD.
MIRAMAR, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS, ATHLINE
8981 BERMUDA DRIVE
MIRAMAR, FL 33025

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BROWN ST. LOUIS, SHARON
500 NW 157TH STREET
MIAMI, FL 33169

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Owen Walker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

08-27-2004