

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003424

FILED
Apr 30, 2009
Secretary of State

Entity Name: POINTS OF HOPE, INC.

Current Principal Place of Business:

2699 W. COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2699 W. COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 42-1622409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, SOL
2699 W. COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33309 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: D () Delete
Name: YEARY, MAX
Address: 5035 NW 57TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D () Delete
Name: LEVY, SOL
Address: 11751 NW 14TH STREET
City-St-Zip: PLANTATION, FL 33323

Title: D () Delete
Name: YEARY, TODD
Address: 5173 NW 74TH. CT.
City-St-Zip: COCONUT CREEK, FL 33073

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: SOL LEVY

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date