

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005632

FILED
Apr 25, 2011
Secretary of State

Entity Name: HOPE FOR FAMILIES: ADOPTION AND COUNSELING SERVICES, INC.

Current Principal Place of Business:

130 SOUTH INDIAN RIVER DR, STE 301
FT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

130 SOUTH INDIAN RIVER DR, STE 301
FT PIERCE, FL 34950

New Mailing Address:

FEI Number: 16-1675497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, KENNETH N DR
130 SOUTH INDIAN RIVER DR, STE 301
FT PIERCE, FL 34950 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: PRES
Name: BROWN, KENNETH N DR
Address: 130 SOUTH INDIAN RIVER DR, STE 301
City-St-Zip: FT PIERCE, FL 34950

Title: TREA
Name: BROWN, LYNN M MRS.
Address: 130 SOUTH INDIAN RIVER DR, STE 301
City-St-Zip: FT PIERCE, FL 34950

Title: SECR
Name: HILL, MOSES A REV.
Address: 130 SOUTH INDIAN RIVER DR, STE 301
City-St-Zip: FORT PIERCE, FL 34950

Title: V.P.
Name: FUNK, LEE DR
Address: 130 SOUTH INDIAN RIVER DR, STE 301
City-St-Zip: FORT PIERCE, FL 34950

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: DR. KENNETH N BROWN LMFT

PRES

04/25/2011

Electronic Signature of Signing Officer or Director

Date