

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008056

FILED
May 03, 2006
Secretary of State

Entity Name: HIGH HOPES FOR CHILDREN, INC.

Current Principal Place of Business:

3910 NW 43RD ST
COCONUT CREEK, FL 33073

New Principal Place of Business:

P. O. BOX 970157
COCONUT CREEK, FL 33097

Current Mailing Address:

3910 NW 43RD ST
COCONUT CREEK, FL 33073

New Mailing Address:

P. O. BOX 970157
COCONUT CREEK, FL 33097

FEI Number: 34-1979757 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KRATZ, D. BRUCE
C/O JECK HARRIS & JONES LLP
1061 E INDIANTOWN ROAD SUITE 400
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

WILLILAMS, PATRICIA
3217 SW 3RD STREET
DEERFIELD BEACH, FL 33442 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: PATRICIA WILLIAMS

05/03/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LUXON, ELIZABETH
Address: 3910 NW 43RD ST.
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: CODEY, CAREY
Address: 2601 10TH AVE., #201
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: PENDLEY, DEBRA T
Address: 4910 PARAMONT DR.
City-St-Zip: LOUISVILLE, KY 40258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LUXON, ELIZABETH
Address: 2181 BOONESBOROUGH RD
City-St-Zip: RICHMOND, KY 40475

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PENDLEY, DEBRA T
Address: P.O. BOX 23104
City-St-Zip: OWENSBORO, KY 42304

I hereby certify that the information supplied with this filing does not qualify for the 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: ELIZABETH LUXON

D

05/03/2006

Electronic Signature of Signing Officer or Director

Date