

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 15, 2006 8:00 am**  
**Secretary of State**

02-15-2006 90032 009 \*\*\*\*61.25

**DOCUMENT # N03000010052**

1. Entity Name  
**CHAPEL OF HOPE CHARISMATIC EPISCOPAL CHURCH,  
INC.**



Principal Place of Business  
**2011 MERCY DR  
ORLANDO, FL 32808**

Mailing Address  
**2011 MERCY DR  
ORLANDO, FL 32808**

**60015848**



2. Principal Place of Business

**2001 Mercy Drive**

Suite, Apt. #, etc.

**Suite 101**

City & State

**Orlando, FL**

Zip

**32808**

Country

**US**

3. Mailing Address

**2001 mercy Drive**

Suite, Apt. #, etc.

**Suite 101**

City & State

**Orlando, FL**

Zip

**32808**

Country

**US**

01032006

Chg-NP

CR2E037 (11/05)

4. FEI Number  
**59-1711323**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**COSTANTINO, FRANK BISHOP  
2011 MERCY DR  
ORLANDO, FL 32808**

7. Name and Address of New Registered Agent

Name

**Costantino, Bishop Frank**

Street Address (P.O. Box Number is Not Acceptable)

**2001 mercy Drive**

**Suite 101**

City

**Orlando**

FL

Zip Code

**32808**

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 May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
COSTANTINO, FRANK BISHOP  
2011 MERCY DR  
ORLANDO, FL 328085629** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
RAMER, CLARENCE  
2011 MERCY DR  
ORLANDO, FL 328085629** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
BROWN, CHARLES  
2011 MERCY DR  
ORLANDO, FL 328085629** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
COSTANTINO-BROWN, LORI  
2011 MERCY DR  
ORLANDO, FL 328085629** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Costantino, Bishop Frank  
2001 mercy Drive, Suite 101  
Orlando, FL 32808** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Brown, Charles  
2001 mercy Drive, Suite 101  
Orlando, FL 32808** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Costantino-Brown, Lori  
2001 mercy Drive, Suite 101  
Orlando, FL 32808** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D** ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/13/06**

Daytime Phone #

ATTACHMENT 60015848  
BRIDGES OF # N03 0000 10052

BISHOP FRANK COSTANTINO  
PRESIDENT



*"A Wholistic Twelve Step Treatment Program"*

February 13, 2006

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed please find our 2006 Not-for-Profit Corporation Annual Reports. Last year we made changes that were not reflected on these reports.

Please insure that all changes are made accordingly.

Thank you.

Marvel Quevedo

Controller