

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005123

FILED  
May 02, 2005  
Secretary of State

**Entity Name:** RESTORING HOPE COMMUNITY DEVELOPMENT CORPORATION, INC.

**Current Principal Place of Business:**

4646 NW 17TH AVE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

4646 NW 17TH AVE  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:** 65-1230733      **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:**

DUNN, RICHARD P II  
4646 NW 17TH AVE  
MIAMI, FL 33142      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: DUNN, RICHARD P  
Address: 1895 NW 57TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: D      ( ) Delete  
Name: HICKS, DALE  
Address: 1167 NW 112TH TERR  
City-St-Zip: MIAMI, FL 33168

Title: D      ( ) Delete  
Name: COLEMAN, DWIGHT  
Address: 2970 NW 210 TERR  
City-St-Zip: MIAMI, FL 33168

**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 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 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: RICHARD P. DUNN II

D

05/02/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date