## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000007647

Entity Name: HOPE FOR KENYA'S KIDS INC.

FILED Mar 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3522 MAJESTY LOOP WINTER HAVEN, FL 33880 **Current Mailing Address: New Mailing Address:** 3522 MAJESTY LOOP WINTER HAVEN, FL 33880 FEI Number: 45-0485803 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FENLEY, SANDRA L 3522 MAJESTY LOOP WINTER HAVEN, FL 33880 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FENLEY, SANDRA L Name: Name: 3522 MAJESTY LOOP Address: Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: DOWNS, M. JEAN Name: HAYES, SHIRLEY JO Address: 14307 W DUSTY TR Address: 3427A S STAFFORD ST City-St-Zip: SUN CITY WEST, AZ 85375 City-St-Zip: ARLINGTON, VA 22206 Title: () Delete Title: (X) Change ( ) Addition DONNELLY, DIANE DONNELLY, DIANE Name: Name: Address: 2401 S QUEEN ST Address: 35 PARKWAY AVE City-St-Zip: ARLINGTON, VA 22202 City-St-Zip: MONETA, VA 24121 Title: ( ) Delete Title: () Change () Addition EDWARDS, GLENDA Name: Name: Address: 12210 CLUBHOUSE DR Address: City-St-Zip: BRADENTON, FL 34202 City-St-Zip: Title: ( ) Delete Title: () Change () Addition JANKELEVICH, SHIRLEY Name: Name: 309 SAXONY COURT Address: Address: City-St-Zip: LEXINGTON, SC 29072 City-St-Zip: Title: () Delete Title: () Change () Addition GAUL. HELEN Name: Name: Address: 9039 SLIGO CREEK PKWY APT 1412 Address: SILVER SPRING, MD 20901 City-St-Zip: 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: SANDRA L. FENLEY P 03/20/2009