## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000009156

FILED Aug 20, 2007 Secretary of State

Entity Name: HOPE N LITERACY INTERNATIONAL FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 872 BRIGHT MEADOW DR LAKE MARY, FL 32746 **Current Mailing Address: New Mailing Address:** 872 BRIGHT MEADOW DR LAKE MARY, FL 32746 FEI Number: 81-0624264 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: Name and Address of New Registered Agent: RAYMOND, JOSUE 872 BRIGHT MEADOW DR LAKE MARY, FL 32746 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: CEO () Change () Addition () Delete RAYMOND, JOSUE Name: Name: 872 BRIGHT MEADOW DR Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: TRES ( ) Delete Title: () Change () Addition Name: ANDRE, RACHEL Name: Address: 1230 EAST HILLCREST STREET Address: City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: Title: SECR () Delete Title: () Change () Addition JUDD-RAYMOND, DAWN Name: Name: 872 BRIGHT MEADOW DRIVE Address: Address: City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: Title: **PRES** ( ) Delete Title: () Change () Addition Name: ANTOINE, PATRICK Name: 4725 CASON COVE DR. APT 1417 Address: Address: City-St-Zip: ORTANDO, FL 32811 US City-St-Zip: Title: COUN Title: () Delete () Change () Addition WENGER, BRIAN Name: Name: 2576 AMAYA TERRACE Address: Address: City-St-Zip: LAKE MARY, FL 32746 US 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: JOSUE RAYMOND CEO 08/20/2007