2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2009
Secretary of State

DOCUMENT# N04000010693

Entity Name: HOPE CENTER OF DELTONA, INC.

Current Principal Place of Business:

1133 SAXON BLVD
ORANGE CITY, FL 32763

New Principal Place of Business:

1133 SAXON BLVD
200
ORANGE CITY, FL 32763

Current Mailing Address:

1133 SAXON BLVD
ORANGE CITY, FL 32763

New Mailing Address:

1133 SAXON BLVD
200
ORANGE CITY, FL 32763

FEI Number: 20-1941421 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AMARO, JORGE
1133 SAXON BLVD
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

AMARO, JORGE
1133 SAXON BLVD
200
ORANGE CITY, FL 32763 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: JA 02/26/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COLON-AMARO, MYRNA
Address: 1133 SAXON BLVD
City-St-Zip: ORANGE CITY, FL 32763

Title: D ( ) Delete
Name: AMARO, JORGE
Address: 1133 SAXON BLVD
City-St-Zip: ORANGE CITY, FL 32763

Title: D ( ) Delete
Name: CRUZ, JOSE
Address: 1133 SAXON BLVD
City-St-Zip: ORANGE CITY, FL 32763

Title: S ( ) Delete
Name: COLON, LISA
Address: 1133 SAXON BLVD
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COLON-AMARO, MYRNA
Address: 1133 SAXON BLVD, SUITE 200
City-St-Zip: ORANGE CITY, FL 32763

Title: D (X) Change ( ) Addition
Name: AMARO, JORGE
Address: 1133 SAXON BLVD, SUITE 200
City-St-Zip: ORANGE CITY, FL 32763

Title: D (X) Change ( ) Addition
Name: CRUZ, JOSE
Address: 1133 SAXON BLVD, SUITE 200
City-St-Zip: ORANGE CITY, FL 32763

Title: S (X) Change ( ) Addition
Name: COLON, LISA
Address: 1133 SAXON BLVD, SUITE 200
City-St-Zip: ORANGE CITY, FL 32763

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: JORGE AMARO D 02/26/2009
Electronic Signature of Signing Officer or Director — Date