

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007200

FILED
Apr 24, 2007
Secretary of State

Entity Name: BRINGING HOPE FOUNDATION, INC.

Current Principal Place of Business:

5959 LA GORCE DR
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

5959 LA GORCE DR
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANSOLA, ANTHONY
5959 LA GORCE DR
MIAMI BEACH, FL 33141 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: P () Delete
Name: RANSOLA, ANTHONY
Address: 5959 LA GORCE DR
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: NAVARRO, NANCY
Address: 1003-85TH ST.
City-St-Zip: NORTH BERGEN, NJ 07047 US

Title: S () Delete
Name: POEHLMAN, JOAN
Address: 148-17 NEWPORT AVE.
City-St-Zip: NEPONSIT, NY 11694

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 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: ANTHONY RANSOLA

P

04/24/2007

Electronic Signature of Signing Officer or Director

Date