

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012207

FILED
Jan 12, 2010
Secretary of State

Entity Name: HOPE FOR TAMPA COMMUNITY CENTER, INC.

Current Principal Place of Business:

5107 W LUTZ LAKE FERN RD
LUTZ, FL 33558

New Principal Place of Business:

Current Mailing Address:

5107 W LUTZ LAKE FERN RD
LUTZ, FL 33558

New Mailing Address:

FEI Number: 20-4246143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, MICHAEL
5107 W LUTZ LAKE FERN RD
LUTZ, FL 33558 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
Name: BIRD, JIM
Address: 5107 WEST LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33558

Title: D
Name: DITTO, JAY
Address: 5107 WEST LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33558

Title: D
Name: EDWARDS, TOM
Address: 5107 WEST LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33558

Title: D
Name: JONES, MICHAEL
Address: 5107 WEST LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33558

Title: D
Name: GARDNER, ED
Address: 5107 WEST LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33558

Title: D
Name: RIDEOUT, DREW
Address: 5107 WEST LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33558

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL JONES

D

01/12/2010

Electronic Signature of Signing Officer or Director

Date