

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003291

FILED
Apr 14, 2009
Secretary of State

Entity Name: VILLAGE OF HOPE OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

9078 ISALIAH LANE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

9078 ISALIAH LANE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 20-4591024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENDER, CHARLES L III
9078 ISALIAH LANE
PALM BEACH GARDENS, FL 33418 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 () Delete
Name: NOCERA, RONALD
Address: 9078 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: CHRISTIANSEN, JOHN T
Address: 9078 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: KLOBA, JOSEPH A
Address: 9078 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: MULLINS, DONNA J
Address: 9078 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: MULLINS, THOMAS D
Address: 9078 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: MULLINS, J. TODD
Address: 9078 ISALIAH LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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:

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 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: CHARLES BENDER

DIR

04/14/2009

Electronic Signature of Signing Officer or Director

Date