

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008702

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Entity Name:** HARBOR OF HOPE AT THE PORT OF PALM BEACH, INC.

**Current Principal Place of Business:**

1EAST 11TH STREET  
SUITE 400  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1EAST 11TH STREET  
SUITE 400  
RIVIERA BEACH, FL 33404

**New Mailing Address:**

**FEI Number:** 20-5401475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WADDELL, CLAYTON T REV  
1 EAST 11TH STREET  
RIVIERA BEACH, FL 33404 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:** DI  
**Name:** HOFFMAN, ARRON  
**Address:** 1 EAST 11TH STREET SUITE 400  
**City-St-Zip:** RIVIERA BEACH, FL 33404 US

**Title:** PRES  
**Name:** KACZWARA, JARRA  
**Address:** 1 EAST 11TH STREET SUITE 400  
**City-St-Zip:** RIVIERA BEACH, FL 33404 US

**Title:** T  
**Name:** WADDELL, CLAYTON  
**Address:** 13114 COASTAL CIRCLE  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410 US

**Title:** SEC  
**Name:** ANDREWWIN, MICHELLE  
**Address:** 1 EAST 11TH STREET SUITE 400  
**City-St-Zip:** RIVIERA BEACH, FL 33404

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:** CLAYTON WADDELL

TRES

02/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date