

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2008 8:00 am**  
**Secretary of State**

05-02-2008 90124 035 \*\*\*\*61.25

<b>DOCUMENT # N06000012632</b>					
<b>1. Entity Name</b> HOPE & RESTORATION INTERNATIONAL MINISTRIES, INC					
<b>Principal Place of Business</b> 2518 11TH AVENUE EAST BRADENTON, FL 34208			<b>Mailing Address</b> 2518 11TH AVENUE EAST BRADENTON, FL 34208		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01212008    Chg-NP    CR2E037 (12/06)	
<b>4. FEI Number</b> 20-3561946				Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
LEE, RICHARD V SUNTRUST CENTER 1001 THIRD AVENUE WEST, SUITE 350 BRADENTON, FL 34205			Name Street Address (P.O. Box Number is Not Acceptable) City FL    Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> D <b>NAME</b> FOSTER, ROZELL A SR <b>STREET ADDRESS</b> 2518 11TH AVE E <b>CITY-ST-ZIP</b> BRADENTON, FL 34208	<input type="checkbox"/> Delete		<b>TITLE</b> P <b>NAME</b> Foster, Rozell A. SR <b>STREET ADDRESS</b> 2518 11th Ave East <b>CITY-ST-ZIP</b> Bradenton, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> VS <b>NAME</b> FOSTER, BRENDA J <b>STREET ADDRESS</b> 2518 11TH AVE E <b>CITY-ST-ZIP</b> BRADENTON, FL 34208	<input type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> Gaston, Meredith <b>STREET ADDRESS</b> 202 10th Ave. West, <b>CITY-ST-ZIP</b> Bradenton, FL 34205	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> T <b>NAME</b> NILES, JENEVA <b>STREET ADDRESS</b> 2120 A 13TH ST W <b>CITY-ST-ZIP</b> BRADENTON, FL 34205	<input type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> Tom & Marilyn Funk <b>STREET ADDRESS</b> 634 Estuary Dr. <b>CITY-ST-ZIP</b> Bradenton, FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> D <b>NAME</b> FOSTER, ROZELL A JR <b>STREET ADDRESS</b> 1144 MAIN ST <b>CITY-ST-ZIP</b> HINESVILLE, GA 31313	<input type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> 1465 FLO Zechman Drive <b>STREET ADDRESS</b> Hinesville, Ga 31313	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> D <b>NAME</b> DYGERT, ALLAN <b>STREET ADDRESS</b> 950136 ST NE <b>CITY-ST-ZIP</b> BRADENTON, FL 34212	<input type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> HOUSTON, DOROTHY <b>STREET ADDRESS</b> 1005 24TH STE <b>CITY-ST-ZIP</b> BRADENTON, FL 34208	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> <i>Rozell A. Foster Sr</i>			April 29, 2008    746-2882		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date    Daytime Phone #</small>		