

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000000526

FILED
Oct 06, 2009
Secretary of State

Entity Name: AGENTS OF HOPE, INC.

Current Principal Place of Business:

73 WHITE HALL DRIVE
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 352762
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 13-4356453 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PIERRE-JEAN, LODDY
73 WHITE HALL DRIVE
PALM COAST, FL 32164 US

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: .LODDY PIERRE-JEAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PIERRE JEAN, LODDY
Address: 73 WHITE HALL DR
City-St-Zip: PALM COAST, FL 32164

Title: V () Delete
Name: SEIDE, MYRIAM F
Address: 40 172 HIGH AVE
City-St-Zip: NYACK, NY 10960

Title: S () Delete
Name: PIERRE JEAN, EMMANUELLE
Address: 2635 SW 35 PL
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: MOMPOINT, GERTHA
Address: 4235 NW 98 WAY
City-St-Zip: SUNRISE, FL 33351

Title: C () Delete
Name: MONICE, JEAN DR
Address: 11141 ALAMEDA BAY CT
City-St-Zip: SUNRISE, FL 33351

Title: MBR () Delete
Name: GENECE, EDDY
Address: 284 RUE CANDOUX TOURRAINE
City-St-Zip: BELVIL II PETIONVILLE HAITI,

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
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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: LODDY, PIERRE-JEAN

P

10/06/2009

Electronic Signature of Signing Officer or Director

Date