

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002289

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: HOPE MINISTRY PROJECT, INC.

## Current Principal Place of Business:

6300 S. FALLS CIRCLE DRIVE  
BLDG. 4 #403  
LAUDERHILL, FL 33319

## New Principal Place of Business:

## Current Mailing Address:

6300 S. FALLS CIRCLE DRIVE  
BLDG. 4 #403  
LAUDERHILL, FL 33319

## New Mailing Address:

FEI Number: 20-8601103

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUILLAUME, JESSIE  
6300 S. FALLS CIRCLE DRIVE  
BLDG. 4 #403  
LAUDERHILL, FL 33319 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: GUILLAUME, JESSIE PRES  
Address: 6300 S. FALLS CIRCLE DRIVE BLDG 4 #403  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: BAPTISTE, CURTIS CHAIRMAN  
Address: 6300 S. FALLS CIRCLE DRIVE BLDG 4 #403  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: ANDERSON, VANESSA SEC  
Address: 6300 S. FALLS CIRCLE DRIVE BLDG 4 #403  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: GILLES, SAMUEL TRESUR  
Address: 6300 S. FALLS CIRCLE DRIVE BLDG 4 #403  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: WILSON-SEJOUR, TANYA  
Address: 6300 S. FALLS CIRCLE DRIVE BLDG 4 #403  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: GIBSON, LIONEL  
Address: 6300 S. FALLS CIRCLE DRIVE BLDG 4#403  
City-St-Zip: LAUDERHILL, FL 33319

## 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: JESSIE GUILLAUME

PRES

03/12/2009

Electronic Signature of Signing Officer or Director

Date