

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005627

FILED
Mar 24, 2010
Secretary of State

Entity Name: HOPE MATERNITY HOUSE, INC.

Current Principal Place of Business:

4955 HARTWELL LOOP
LAND O LAKES, FL 34638

New Principal Place of Business:

Current Mailing Address:

4955 HARTWELL LOOP
LAND O LAKES, FL 34638

New Mailing Address:

FEI Number: 26-0402814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WINDHAM, ROBIN A
4955 HARTWELL LOOP
LAND O LAKES, FL 34638 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: PD
Name: WINDHAM, ROBIN A
Address: 4955 HARTWELL LOOP
City-St-Zip: LAND O LAKES, FL 34638

Title: VP
Name: WINDHAM, JOSEPH A
Address: 4955 HARTWELL LOOP
City-St-Zip: LAND O LAKES, FL 34638

Title: TD
Name: BROWN, DWIGHT A
Address: 203 VALENCIA CIR
City-St-Zip: ST PETERSBURG, FL 33716

Title: D
Name: SMYLLIE, SCOTT
Address: 2521 ALLWOOD AVE
City-St-Zip: VALRICO, FL 33594

Title: SD
Name: DORR, NICOLE
Address: 1607 COTTAGEWOOD DRIVE
City-St-Zip: BRANDON, FL 33510

Title: D
Name: PEREGOLISE, PENNY
Address: 10728 DEEPBROOK DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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: ROBIN A WINDHAM

PD

03/24/2010

Electronic Signature of Signing Officer or Director

Date