2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009508

FILED Sep 17, 2010 Secretary of State

Entity Name: HOPE CENTER OF MARIANNA, INC.

Current Principal Place of Business: New Principal Place of Business:

2820 ROCKWELL STREET APT B MARIANNA, FL 32446

New Mailing Address: Current Mailing Address:

PO BOX 139 2769 BRENDA STREET MARIANNA, FL 32446 MARIANNA, FL 32448

FEI Number: 26-1175515 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOYETTE, MELISSA LYNN BOYETTE, MELISSA LYNN 2940 GREEN STREET APT B 2769 BRENDA STREET MARIANNA, FL 32446 MARIANNA, FL 32448 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: MELISSA BOYETTE 09/17/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PSTD

BOYETTE, MELISSA LYNN Name: Address: 2940 GREEN STREET, APT B City-St-Zip: MARIANNA, FL 32446

Title:

Name: GRIFFIN, MICHAEL B Address: 2514 MASHBURN RD City-St-Zip: MARIANNA, FL 32448

Title:

LONG, NADINE Name:

3385 NORTH OAKS DRIVE Address: City-St-Zip: MARIANNA, FL 32446

Title:

Name: OSWALD, DIANE T Address: 3205 5TH ST City-St-Zip: MARIANNA, FL 32446

Title:

SPEIGHTS, LILLIE K Name: 4222 SOUTH STREET Address: City-St-Zip: MARIANNA, FL 32446

Title:

BOYETTE, TIFFANNY M Name: Address: 2940 APT. B GREEN STREET MARIANNA, FL 32446 City-St-Zip:

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: MELISSA BOYETTE MRS. 09/17/2010