

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009508

FILED  
Aug 02, 2011  
Secretary of State

**Entity Name:** HOPE CENTER OF MARIANNA, INC.

**Current Principal Place of Business:**

2820 ROCKWELL STREET  
APT B  
MARIANNA, FL 32446

**New Principal Place of Business:**

**Current Mailing Address:**

2769 BRENDA STREET  
MARIANNA, FL 32448

**New Mailing Address:**

**FEI Number:** 26-1175515

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOYETTE, MELISSA LYNN  
2769 BRENDA STREET  
MARIANNA, FL 32448 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:** PSTD  
**Name:** BOYETTE, MELISSA LYNN  
**Address:** 2940 GREEN STREET, APT B  
**City-St-Zip:** MARIANNA, FL 32446

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

**Title:** D  
**Name:** LONG, NADINE  
**Address:** 3385 NORTH OAKS DRIVE  
**City-St-Zip:** MARIANNA, FL 32446

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

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

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

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 L. BOYETTE

PSTD

08/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date