

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012033

FILED
Apr 20, 2009
Secretary of State

Entity Name: OPEN DOORS OF HOPE, INC

Current Principal Place of Business:

9196 ESTERO RIVER CIRCLE
ESTERO, FL 33928 US

New Principal Place of Business:

17371 E.CARNEGIE CIRCLE
FORT MYERS, FL 33967 US

Current Mailing Address:

PO BOX 619
ESTERO, FL 339280619 US

New Mailing Address:

FEI Number: 41-2266349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLILOVE, COLIN
9196 ESTERO RIVER CIRCLE
ESTERO, FL 33928 US

Name and Address of New Registered Agent:

FULLILOVE, COLIN
17371 E.CARNEGIE CIRCLE
FORT MYERS, FL 33967 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: COLIN D. FULLILOVE

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FULLILOVE, KALEEN
Address: 9196 ESTERO RIVER CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: D () Delete
Name: FULLILOVE, COLIN
Address: 9196 ESTERO RIVER CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: D () Delete
Name: DELINO, BENDINOTI
Address: 4530 SW 10TH AVE
City-St-Zip: CAPE CORAL, FL 33914 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FULLILOVE, COLIN D
Address: 17371 E.CARNEGIE CIRCLE
City-St-Zip: FORT MYERS, FL 33967 US

Title: D (X) Change () Addition
Name: BENDINOTI, DELINO
Address: 4530 SW 10TH AVE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: D (X) Change () Addition
Name: BENDINOTI, KRISTINE ELLEN
Address: 4530 SW 10TH AVE
City-St-Zip: CAPE CORAL, FL 33914 US

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: COLIN D. FULLILOVE

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date