

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001167

FILED  
Jun 29, 2009  
Secretary of State

Entity Name: NAT KING COLE GENERATION HOPE, INC.

**Current Principal Place of Business:**

2657 NW 27TH AVE  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

2657 NW 27TH AVE  
BOCA RATON, FL 33434

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

BEARDEN, JAMES ESQ  
445 E PALMETTO PARK ROAD  
BOCA RATON, FL 33432 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HOOKER, CASEY C  
Address: 2657 NW 27TH AVE  
City-St-Zip: BOCA RATON, FL 33434

Title: D ( ) Delete  
Name: AUGUSTUS, TIMOLIN C  
Address: 6217 NW 23RD DRIVE  
City-St-Zip: BOCA RATON, FL 33434

Title: D ( ) Delete  
Name: KELLNER, JAMIE  
Address: 1545 E VALLEY ROAD  
City-St-Zip: MONTECITO, CA 93108

**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:

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: TIMOLIN C AUGUSTUS

D

06/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date