

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010740

FILED
Apr 11, 2009
Secretary of State

Entity Name: OUR HOPE CENTER, INC.

Current Principal Place of Business:

893 PONDELLA RD
N.FT. MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

893 PONDELLA RD
N.FT. MYERS, FL 33903

New Mailing Address:

FEI Number: 26-3810864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOHL, DEBBIE
560 PINE ISLAND RD
SUITE 6
N. FORT MYERS, FL 33903 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: P () Delete
Name: MIKOLAK, BRANDI
Address: 560 PINE ISLAND RD
City-St-Zip: N FORT MYERS, FL 33903

Title: OFF () Delete
Name: KRUSE, TONI
Address: 18441 COLUMBINE RD
City-St-Zip: FT MYERS, FL 33967

Title: TR (X) Delete
Name: CLEMENTS, CHRIS DVM
Address: 560 PINE ISLAND RD #6
City-St-Zip: N FT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MIKOLAK, BRANDI
Address: 893 PONDELLA RD
City-St-Zip: N FORT MYERS, FL 33903

Title: OFF (X) Change () Addition
Name: COX, CLAYTON OFFICER
Address: 893 PONDELLA RD.
City-St-Zip: NORTH FORT MYERS, FL 33903

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: CLAYTON COX

OF

04/11/2009

Electronic Signature of Signing Officer or Director

Date