2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2009
Secretary of State

DOCUMENT# N08000011336

Entity Name: HIGH FIVES FOR HOPE, INC.

Current Principal Place of Business:

5477 BALDWIN PARK STREET
ORLANDO, FL 32814 US

New Principal Place of Business:

Current Mailing Address:

5477 BALDWIN PARK STREET
ORLANDO, FL 32814 US

New Mailing Address:

P.O. BOX 141468
ORLANDO, FL 32814 US

FEI Number: 26-3959526 **FEI Number Applied For ( )** **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:

STILES, MARK A
5477 BALDWIN PARK STREET
ORLANDO, FL 32814 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: STILES, MARK A
Address: 5477 BALDWIN PARK STREET
City-St-Zip: ORLANDO, FL 32814 US

Title: VP ( ) Delete
Name: FLANNERY, MICHAEL
Address: 1220 NW 23RD TERRACE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: S ( ) Delete
Name: FOREMAN, MATTHEW A ESQ
Address: 4201 TAMPICO TRAIL
City-St-Zip: HERNANDO BEACH, FL 34607 US

Title: T ( ) Delete
Name: SIMCOKE, JAMES
Address: 9 BATTERY STREET #9
City-St-Zip: BOSTON, MA 02109 US

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:

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: MARK A. STILES P 06/22/2009
Electronic Signature of Signing Officer or Director — Date