2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007835

FILED Jan 18, 2011 Secretary of State

Entity Name: HOUSE OF HOPE SUN COAST FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business:

18942 MCGRATH CIRCLE 5192 CHAVES CIRCLE

PORT CHARLOTTE, FL 33948 PORT CHARLOTTE, FL 33948

Current Mailing Address: New Mailing Address:

P. O. BOX 380596 MURDOCK, FL 33938

FEI Number: 27-0759039 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PAPE, LISA R
PAPE, LISA R
19042 MOCRATH CIRCLE

18942 MCGRATH CIRCLE 5192 CHAVES CIRCLE

PORT CHARLOTTE, FL 33948 US PORT CHARLOTTE, FL 33948 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: 01/18/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: PAPE, LISA

Address: 5192 CHAVES CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: V

Name: STOUCH, SUSAN

Address: 4313 S. CRANBERRY BLVD. City-St-Zip: NORTH PORT, FL 34286

Title: CHRM

Name: OSTERMAN, JENNIFER
Address: 1060 BISCAYNE DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: CHRM
Name: PAPE, DENNIS
Address: 5192 CHAVE CIRCLE

City-St-Zip: PORT CHARLOTTE, FL 33948

Title: SEC

Name: PAGLIUGHI, DAVE Address: 2335 BEACON ST

City-St-Zip: PORT CHARLOTTE, FL 33952

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: LISA R. PAPE PRES 01/18/2011