

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004516

FILED  
Jan 31, 2012  
Secretary of State

**Entity Name:** MOTHERS OF HOPE INTERNATIONAL OUTREACH MINISTRY INC.

**Current Principal Place of Business:**

33870 BLUE STAR HWY  
APT. 510  
MIDWAY, FL 32343

**New Principal Place of Business:**

**Current Mailing Address:**

33870 BLUE STAR HWY  
APT. 510  
MIDWAY, FL 32343

**New Mailing Address:**

**FEI Number:** 90-0576649

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDWARDS, NATASHA P  
33870 BLUE STAAR HWY  
APT. 510  
MIDWAY, FL 32343 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: VP  
Name: GAVIN, DONALD  
Address: 33870 BLUE STAR HWY, APT. 510  
City-St-Zip: MIDWAY, FL 32343

Title: S  
Name: WHITE, TANYA  
Address: 33870 BLUE STAR HWY, APT. 510  
City-St-Zip: MIDWAY, FL 32343

Title: T  
Name: HANSELL, SHELIA  
Address: 33870 BLUE STAR HWY, APT. 510  
City-St-Zip: MIDWAY, FL 32343

Title: P  
Name: EDWARDS, NATASHA  
Address: 33870 BLUE STAR HWY, APT. 510  
City-St-Zip: MIDWAY, FL 32343

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: NATASHA P EDWARDS

PRES

01/31/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date