

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009259

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** RESTORATION AND HOPE MINISTRIES, INC.

**Current Principal Place of Business:**

8019 VIA HACIENDA  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

8019 VIA HACIENDA  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

**FEI Number:** 27-4678612

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REID, BEVERLEY L  
8019 VIA HACIENDA  
PALM BEACH GARDENS, FL 33418 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  
**Name:** REID, BEVERLEY L  
**Address:** 8019 VIA HACIENDA  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

**Title:** VP  
**Name:** REID, GLADSTONE G  
**Address:** 8019 VIA HACIENDA  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

**Title:** P  
**Name:** SAMUELS, ESMINE  
**Address:** 8019 VIA HACIENDA  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

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:** BEVERLEY REID

P

01/27/2011

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

\_\_\_\_\_  
Date