FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT 1998			7.7	Secretary of State DIVISION OF CORPORATIONS			Secretary of State	
DOCUMENT # N22722 (5)]	
H.O.P.E. OUTREACH MINISTRIES, INC.							19841181 518 11914 11911 11911 11915 11918 11918 1191	Bil Bigit Bigit a. a
Principal Place of Business Mailing Address							T ORBINIAL BIA 1504A FIBIL 1801A 1584A 1101 BIBIL BIBIL BI	Sir mjári Brafi áltáli ítál
9651 N.W. 2ND STREET 3651 N.W. 2ND STREET FT. LAUDERDALE FL 33311-8205 FT. LAUDERDALE FL 33311-82							3. Date Incorporated or Qualified	
FI. DIDUCTURE PE 33311-020							09/28/1987 4. FEI Number	I Annilla d Car
							65-0011309	Applied For Not Applicable
2. Principal P	lace of Busin	ness	2a. Mailing Address					8.75 Additional
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing	Fee Required 5.00 May Be
22			27					Added to Fees
City & State	6		City & State				7. Is this nonprofit corporation a homeowners as	
Zip	p Country		Zip Coo		ountry		Yes No 8. This corporation owes or has paid the current year Intangible	
24 25			29 30				Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent						Name	10. Name and Address of New Registered Age	<u>m</u>
LLOYD, FRANK					82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
3651 N.W. 2ND STREET					83			
FT. LAUDERDALE FL 33311								
7					84	City	FL	5 Zip Code
1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agent and life if applicable. (NOTE Registered Agen						nt signature require		
12. TITLE	PD	OFFICERS AND	DIRECTORS DELETE	13. 1.1 TII			ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12 Change
NAME		ELDER FRANK		1.2 NA				Ollarige E Addition
STREET ADDRESS		V. 2ND STREET				ADDRESS		
CITY-ST-ZIP		DERDALE FL 33311		1.4 Cf	TY-S	T-ZIP		
TITLE	VD		☐ DELETE	2.1 TIT	LE			Change Addition
NAME		JACQUELINE		2.2 NA				
STREET ADDRESS		V. 2ND STREET DERDALE FL 33311				ADDRESS		
CITY-ST-ZIP TITLE	†	PENDALL I C 000 I I	DELETE	3.1 111		ST-ZIP		Change Addition
NAME	LLOYD.	MIN. FREDERICK	_	3.2 NA			_	,
STREET ADDRESS		21ST STREET		3,3 ST	REET	ADDRESS		
CITY-ST-ZIP		A HEIGHTS NY		3.4. CI	TY-S	T-ZIP		
TITLE	SD SULLOS	1501E	☐ DELETE	4.1 Tit			Ц	Change
NAME	GUMBS,		D 007	4. 2 N/				
STREET ADDRESS CITY-ST-ZIP	_	V. 56T H AVENUE, APT. Der <u>da</u> le fl 33313	U-201	4.4 CIT		ADDRESS		}
TITLE	I II WYOL	PENDALL IL GOOTO	DELETE	5.1 TIT		- 411		Change Addition
NAME				5.2 NAME				151-2198
STREET ADDRESS				5.3 ST	REET	ADDRESS		\`\\ \\$\$\\ `\
CITY-ST-ZIP			·····	5.4 CI)	_	I - ZIP		\
TITLE			☐ DELETE	6.1 TiT			80000241118	Change Addition
NAME 6.21 STREET ADDRESS 6.33						ADDDECO	_01456420010101902	
DIRECT WATER				0.3 51	ntt i J	ADDRESS	李孝孝得1 2月	ļ

City-st-zip

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attackment with an address

SIGNATURE:

FILED

Jan 23 1998 8:00am