FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jun 04, 2001 8:00 am DOCUMENT # N32823 **Secretary of State** 1. Entity Name 06-04-2001 90009 004 ****61.25 ZION'S HOPE INC. Principal Place of Business Mailing Address 001124 4655 VINELAND ROAD P O BOX 690909 ORLANDO FL 32811 ORLANDO FL 32869 2. Principal Place of Business 3. Mailing Address 4655 Vineland Road P. O. Box 590909 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2976410 Not Applicable Orlando, FI Orlando, Country Country Zip Zip \$8.75 Additional 5. Certificate of Status Desired 32811 32869 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) CHARLES MORGAN, ESQ. 1300 N.W. 167TH STREET MIAMI FL 33169 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOT: Registered Agent signature required when reinstating) DATE **FILE NOW:** 9. Election Campaigr Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change Addition TITLE ☐ Delete TITLE NAME ROSENTHAL, MARVIN NAME STREET ADDRESS STREET ADDRESS 4655 VINELAND ROAD CITY-ST-ZIP CITY-ST-7IP ORLANDO FL X Change Addition TITLE ☐ Delete TITLE NAME PIERRE, SCOTT NAME STREET ADDRESS STREET ADDRESS 5092 Isleworth Country Club Drive 101 WASHINGTON ST PMB 770 CITY-ST-ZIP CITY-ST-ZIP GRAND HAVEN MI Windermere, FL 34786 ☐ Change Addition TITLE XIX0elete TITLE NAME KARSTEN, GLENN D NAME STREET ADDRESS STREET ADDRESS 13515 WINDCREST LANE CITY-ST-ZIP CITY-ST-ZIP GRAND HAVEN MI Addition TITLE ☐ Delete TITLE TD NAME TEASDALE, PAUL NAME STREET ADDRESS STREET ADDRESS MISSION ROAD CITY-ST-ZIP CITY-ST-ZIP ROBBINSVILLE NC ☐ Addition Change TITLE ☐ Delete TITLE TEASDALE, JAMES NAME NAME STREET ADDRESS MISSION ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROBBINSVILLE NC ☐ Change TITLE ☐ Delete TITLE Addition BISHOP, DONALD C NAME NAME STREET ADDRESS STREET ADDRESS 15916 LALINDURA DR. CITY-ST-ZIP CITY-ST-ZIP WHITTIER CA 90603

12. I hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that r y 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

QUAL 1 D. Rosenthal 5/31/01 407-872-2272