2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38410

FILED Jan 13, 2012 Secretary of State

Entity Name: HOPE PREGNANCY CENTERS, INC.

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

943 SW 71 AVENUE

NORTH LAUDERDALE, FL 33068 US

Current Mailing Address: New Mailing Address:

PO BOX 290061 PO BOX 290061

DAVIE, FL 333290061 DAVIE, FL 33329 US

FEI Number: 65-0213258 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:

HODGES, PERRY W JR 1401 E. BROWARD BLVD.

FORT LAUDERDALE, FL 33301 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: ALLRED, SCOTT
Address: 333 LAKESIDE COURT
City-St-Zip: SUNRISE, FL 33326 US

Title:

Name: BLANTON, BERNITA Address: 1711 N. 45 AVE.

City-St-Zip: HOLLYWOOD, FL 33021 US

Title:

Name: BROOKINS, BRIAN Address: 2460 NW 108 DR

City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: [

 Name:
 COTTONE, CHRIS

 Address:
 1842 SW 132 WAY

 City-St-Zip:
 DAVIE, FL 33325 US

Title: D Name: KE

Name: KEY, TED Address: 2141 NE 54TH COURT

City-St-Zip: FORT LAUDERDALE, FL 33308 US

Title: [

 Name:
 TRUEX, JANET

 Address:
 4740 SW 72 AVE.

 City-St-Zip:
 DAVIE, FL 33314 US

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: CHRIS COTTONE D 01/13/2012