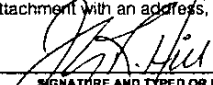


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 8:00 am
Secretary of State

01-20-2006 90035 022 ****70.00

DOCUMENT # N41047 1. Entity Name HEART OF FLORIDA HOPE FOUNDATION, INC.					
Principal Place of Business 2800 SE MARICAMP RD. OCALA, FL 34471-5538			Mailing Address 2800 SE MARICAMP RD. OCALA, FL 34471-5538		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		01092006 Chg-NP CR2E037 (11/05)	
4. FEI Number 59-3246094				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STRAWDER, TROY 2800 SE MARICAMP RD OCALA, FL 34471			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBERTSON, MIKE P.O. BOX 6000 OCALA, FL 34478	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Askren, Leigh Anne 1743 NE 12 Street Ocala, Fl 34470
☐ Change ☒ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THOMPSON, TARN 7431 SW 14 ST OCALA, FL 34482	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
☐ Change ☐ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DELORIO, LAUREN 2405 SE 28TH STREET OCALA, FL 34471	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
☐ Change ☐ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENCSI, BILL 2322 NE 29TH AVE OCALA, FL 34470	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
☐ Change ☐ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HILL, JOHNNY 316 SW 33RD AVE OCALA, FL 34474	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
☐ Change ☐ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANDULLO, SAMMIE 16 NORTHERN DANCER DRIVE OCALA, FL 34482	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
☐ Change ☐ Addition		☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date January 12, 2006		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Johnny Hill, President			Daytime Phone # 352-266-1093		

HOPE FOUNDATION

 TO BENEFIT THE

 ARC OF MARION COUNTY

2005 OFFICERS AND MEMBERS

Hope Foundation Title	Name	Address	Phone Numbers	E-mail Address	Terms Left
President	Johnny Hill	Teco People's Gas 316 SW 33 Avenue Ocala, FL 34474	Work: 401-3403 Cell: 266-1093	ocfih@Tecoenergy.com	1 Year
1st V.P.	Tam Thompson	7431 NW 14 Street Ocala, FL 34482	Cell: 427-5274 Home: 873-0283 Work 1: 854-0031 Work 2: 237-4007	Fax30@aol.com	2 Years
Treasurer	Mike G. Robertson	Munroe Regional Medical Center 1500 SW 1 st St Ocala, FL 34478	Home: 402-5324 Cell: 843-1302	mikeroberatson@mrhs.org	1 Year
Secretary	Leigh Anne Askren	1743 NE 12 th Street Ocala, FL 34470	Work: 671-2179 Fax: 402-5069 Cell: 817-9866 Home: 840-5422	leighaskren@mrhs.org	2 Years
D	Bill Bencsik	2322 NE 29 Avenue Ocala, FL 34470	Office: 732-9775 Home: 854-0790	bill@bencsik.com	1 Year
D	Sammie Candullo	16 Northern Dancer Drive Ocala, FL 34482	Home: 861-2910 Fax: 861-2911 Cell: 843-1567 Work: 351-0011	ccsrsam@aol.com	1 Year
D	Tom Conrad	Conrad Tree Surgeons 727 NE 17 th Court Ocala, FL 34470	Work: 867-1123	tliconrad@aol.com	2 Years
D	Phil Cribb	3534 SE 8 th Street Ocala, FL 34471	Work: 622-2995 ext: 313 Home: 425-8480	phil@ocalamagazine.com	3 Years

ATTACHMENT

#N41047

40004229

ATTACHMENT

40004229

~~16011~~

Hope Foundation Title	Name	Address	Phone Numbers	E-mail Address	Terms Left
D	Lauren Deiorio	2025 SE 73 Rd Loop Ocala, FL 34480	Home: 620-9010 Cell: 208-7681 Fax: 620-2434	ldeiorio@aol.com	1 Year
D	John Driscoll	3442 SE Lake Weir Rd #B Ocala, FL 34471	Work: 622-5664 Fax: 671-5373	ajlcpa@atlantic.net	3 Years
D	Laurie Garcia	5001 SW 20 th #3806 Ocala, FL	Work: 237-2430 Home: 854-6554 Fax: 888-4943253	llagaica@aol.com	3 Years
D	Nicole Hagedorn	1318 SE 49 th Ave. Ocala, FL 34471	Work: 622-7115 Home 598-0973	Hagendazs2@yahoo.com	3 Years
D	Pam Michell	2324 SE 14 Street Ocala, FL 34471	Home 368-1060 Work: 402-5100 Cell: 207-2546	pammichell@mths.org	2 Years
D	Troy Strawder	ARC Marion, Inc 2800 SE Mancamp Road Ocala, FL 34471	Work: 387-2210	tstrawder@mcarc.com	
D	William Taylor	10436 SW 45 th Ave. Ocala, FL 34475	Work: 237-2181 Home: 867-1664 Fax: 237-2040	William@combinedinsuranceservices.com	3 Years