

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

53 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N47439 (7)

1. Corporation Name

HOPE FOR THE WORLD FOUNDATION, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **02/19/1992** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-3108990** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☒ No

Principal Place of Business
**500 S. SEMORAN BLVD.
ORLANDO FL 32807
US**

Mailing Address
**500 S. SEMORAN BLVD.
ORLANDO FL 32807
US**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 25 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JANNEY, DAVID A.
1515 ENSENADA DR.
ORLANDO FL 32825**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
JANNEY, DAVID A.
1515 ENSENADA DR.
ORLANDO FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
JANNEY, A.C.
P. O. BOX 574003 N/A
ORLANDO FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**STD
FRANKS, JIMMY
1880 SAHA CT
KISSIMEE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
STOKES, KEITH
2724 TIERRA CIRCLE
WINTER PARK FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
THOMAS, VERNON
225 BAHAMA RD.
WINTER SPRINGS FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
SMITH, STEVE
1524 DEMING DR
ORLANDO FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JIMMY FRANKS

4/16/95

(Name)

907-281-4673

(Telephone Number)