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Feb 02, 1999 8:00am
Secretary of State

02-02-1999 90001 036 *****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999			FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # N47439			
1. Corporation Name HOPE FOR THE WORLD FOUNDATION, INC.			
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 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 02/19/1992	
				4. FEI Number 59-3108990	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent SMITH, R. STEPHEN 9336 RAVEN DELL ST ORLANDO FL 32825				10. Name and Address of New Registered Agent 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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS			
TITLE	PD	<input type="checkbox"/> DELETE	
NAME	JANNEY, DAVID A.		
STREET ADDRESS	1515 ENSENADA DR.		
CITY-ST-ZIP	ORLANDO FL		
TITLE	VD	<input type="checkbox"/> DELETE	
NAME	JANNEY, A.C.		
STREET ADDRESS	P. O. BOX 574003 N/A		
CITY-ST-ZIP	ORLANDO FL		
TITLE	D	<input type="checkbox"/> DELETE	
NAME	STOKES, KEITH		
STREET ADDRESS	2724 TIERRA CIRCLE		
CITY-ST-ZIP	WINTER PARK FL		
TITLE	D	<input type="checkbox"/> DELETE	
NAME	THOMAS, VERNON		
STREET ADDRESS	225 BAHAMA RD.		
CITY-ST-ZIP	WINTER SPRINGS FL		
TITLE	STD	<input type="checkbox"/> DELETE	
NAME	SMITH, R. STEPHEN		
STREET ADDRESS	9336 RAVEN DELL ST		
CITY-ST-ZIP	ORLANDO FL		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 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 attachment with an address, with all other like empowered.

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-99 407 415 9336
Date Daytime Phone