

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47441

FILED
Aug 27, 2005
Secretary of State

Entity Name: HOPE FOR THE WORLD, INC.

Current Principal Place of Business:

2440 FORTUNE RD
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 450096
KISSIMMEE, FL 34745 US

New Mailing Address:

P.O. BOX 999
ORANGE PARK, FL 32067 US

FEI Number: 59-3108991 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRANKS, JIMMY
6065 LAKE LIZZIE DR.
SAINT CLOUD, FL 34771 US

Name and Address of New Registered Agent:

FRANKS, MICHAEL
2921 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32067 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: MICHAEL FRANKS

08/27/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRANKS, JIMMY
Address: 1860 SAHA CT
City-St-Zip: KISSIMMEE, FL

Title: VP () Delete
Name: MULLINS, ROGER
Address: 170 HOL-MAR TR
City-St-Zip: MCDONOUGH, PA

Title: STD () Delete
Name: LANE, MARVIN
Address: P.O. BOX 451795 N/A
City-St-Zip: KISSIMMEE, FL

Title: D () Delete
Name: BARKER, LARRY
Address: 516 ELBERTA ST.
City-St-Zip: MUSKOGEE, OK 74403

Title: D () Delete
Name: FRANKS, MIKE
Address: 2921 DOCTOR'S LAKE DR
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for 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 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 an address, with all other like empowered.

SIGNATURE: JIMMY FRANKS

P

08/27/2005

Electronic Signature of Signing Officer or Director

Date