ANNUAL REPORT

Feb 14, 2005 8:00 am **DOCUMENT # N48843 Secretary of State** H.O.P.E. OF TAMPA BAY, INC. 02-14-2005 90077 024 ****70.00 Principal Place of Business Mailing Address P 0 BOX 151653 P 0 BOX 151653 TAMPA, FL 33684 **TAMPA, FL 33684** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 02082005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number Applied For 59-3126627 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PADRON, NORMA - -Street Address (P.O. Box Number is Not Acceptable) 3724 THORNWOOD DR. TAMPA, FL 33618 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make check payable to \$5.00 May Be Filing Fee is \$61.25 9. Election Campaign Financing Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PD Delete TITLE Addition PEARCE, SONIA B NAME NAME STREET ADDRESS 3316 KATHLEEN ST. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33607 CITY-ST-ZIP Tr Delete ひカ TITLE TITLE Addition LUCCIONI, SELESTE NAME NAME STREET ADDRESS 10478 ST. TROPEZ PLACE STREET ADDRESS CITY-ST-7IP **TAMPA, FL 33615** CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition PADRON, NORMA NAME NAME STREET ADDRESS 3724 THORNWOOD DR. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33618 CITY-ST-ZIP TITLE TITL F Delete ☐ Channe ■ Addition NAME GORDON, RUTH NAME 4402 BEACH PK DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33609** CITY-ST-ZIP Change ☐ Delete TITLE Addition TITLE ዎጋ COLON, DEBBIE NAME NAME STREET ADDRESS 8807 W. WELLESLY CT. STREET ADDRESS ODESSA, FL 33556 CITY-ST-ZIP CITY-ST-ZIP SCAGLIONE, BELINDA 2901 W. FOUNTAIN BLVD TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TAMPA, FL

12. 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 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

FILED

2-9-05 813-969

ATTACHMENT

50015328

Document # N48843

H.O.P.E. of Tampa Bay, Inc. P. O. Box 151653 Tampa, FL 33684-1653

(Box #11 - additional sheet)

Title

VD

Addition

Name

Andersen, Frances

St. Address

3404 Waterbridge Drive

City,St,Zip

Tampa, FL 33618

Title

SD

Addition

Name

Almerico, Victoria

St. Address

204 Treasure Drive

C,S,Z

Tampa, FL 33609

Title

SD

Addition

Name

Sereikis, Lori

St. Address

16119 Country Crossing Dr.

C,S,Z

Tampa, FL 33624