FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

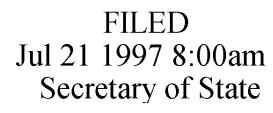
Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N48993

(2)

HOPE ADOPTION AGENCY, INC.





Principal Place of Business Malling Address										
1564 DIXIE WAY 1564 DIXIE WAY MELBOURNE FL 32935 MELBOURNE FL 32935 MELBOURNE FL 32935-5702										
					_	3. Date Incorporated or Qualified 05/15/1992	3a. Date of 07/2	Last R 25/19		
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number 59-3122766	Applied For Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Stat	te	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Co	untry		8. This corporation has liability for in				
24	25 29 30					Florida Statutes Yes 1 No				
<u> </u>	9. Name and Address of Curren	nt Registered Agent		ļ		10. Name and Address of New Reg	istered Agent			
				81	Name					
ANDERSON, J. PATRICK				82 Street Address (P.O. Box Number is Not Acceptable)						
930 S. HARBOR CITY BLVD.										
SUITE 505				83						
MELBOURNE FL 32901				84	City		FL 85	Zip (Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statules, 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										
12.			E: Registere	ed Agen	t signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DIDE	OTOD	č 111 40	
TITLE			_	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE			Addition	
NAME	WINDLE, PATRICIA BAIRD			1.2 NAME			v	urige	L Addition	
STREET ADDRESS	1584 DIXIE WAY		1.3 STREET ADD		DDDDD					
CITY-ST-ZIP	MELBOURNE FL		1	1.4 CITY-ST-ZIP					. !!	
TITLE	D	DELETE			LIT	· · · · · · · · · · · · · · · · · · ·	T C	nange	Addition	
NAME	WINDLE, EDWARD W. JR.	· · · · · · · · · · · · · · · · · · ·		2.2 NAME			_ "	ungo		
STREET ADDRESS		ARRA BUILDE LAISES		2.3 STREET ADDRESS						
CITY-ST-ZIP	MELBOURNE FL		1	CITY-ST						
TITLE	D	DELETE	3.1 TI				□ CI	nange	Addition	
NAME	WINDLE, RONI L		3.2 N	AME				•		
STREET ADDRESS	1584 DIXIE WAY			3.3 STREET ADDRESS						
CITY-ST-ZIP	MELBOURNE FL 32935		3.4, 0	OTY-ST	-ZIP					
TITLE		☐ DELETE	4.1 TITLE				☐ Cr	ange	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET		DDRESS					
CITY-ST-ZIP			4.4 CI	ITY-ST-	ZIP					
TITLE		DELETE	5.1 TITLE				☐ Ch	ange	Addition	
NAME			5.2 N	AME						
STREET ADDRESS			5.3 ST	TREET A	DDRESS					
CITY-ST-ZIP			5.4 CI	ITY-ST-	ŽIP					
TITLE		DELETE	6.1 70	TLE			☐ Ch	ange	Addition	
NAME			6.2 N	AME						
STREET ADDRESS			6.3 ST	TREET A	DDRESS				1	
CITY-ST-ZIP			6.4 CI	ITY-ST-	ZIP				1	
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I do 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 logal 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 it changes, or on an attachment with an address.