

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra J. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 APR 24 AM 9:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N94000006126 (6)

1. Corporation Name

HOPE HOUSE, INC.

Principal Place of Business

8026 SE 126TH PLACE  
BELLEVUE FL 34420

Mailing Address

8026 SE 126TH PLACE  
BELLEVUE FL 34420

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1994

3a. Date of Last Report

N/A

4. FEI Number

☒ Applied For

☐ Not Applicable

2. Principal Place of Business

21

2a. Mailing Address

26

P.O. Box 1898

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

BELLEVUE, FL

Zip

24

Country

25

Zip

29

34421

Country

30

MARION

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

Fee Not Required

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOSTER, NANCY J  
8026 SE 126TH PLACE  
BELLEVUE FL 34420

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

Nancy Jane Foster

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

NOTE: Registered Agent signature required when re-registering

3/13/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PRESIDENT  
NANCY FOSTER  
8026 SE 126TH PL.  
BELLEVUE, FL 34420  
LYNN FOSTER  
8014 SE 126TH PL.  
BELLEVUE, FL 34420  
KATE EASTMAN  
3304 SW 84TH CIRCLE  
OCALA, FL 34474  
MARGARET HOLDEN  
6999 B GANTON RD.  
OCALA, FL 34472  
MARILETTA ROBERTS  
11680 S.W. 89TH TERRACE  
OCALA, FL 34481  
MARGARET ADAMS  
8885 S.W. 93RD PL.  
OCALA, FL 34474

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP  
21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP  
31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP  
41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP  
51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP  
61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 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 119.07(3)(k), 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.

SIGNATURE:

Nancy Jane Foster

NANCY JANE FOSTER

Date

3/13/95

(Type Here)

904-245-1380