

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002593

FILED
Apr 29, 2009
Secretary of State

Entity Name: HOPE OUTREACH CENTER, INC.

Current Principal Place of Business:

4700 SW 64 AVE
SUITE A
DAVIE, FL 33314 US

New Principal Place of Business:

Current Mailing Address:

4700 SW 64 AVE
SUITE A
DAVIE, FL 33314 US

New Mailing Address:

FEI Number: 65-0590679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELEN, SHINNERS
611 NW 97 TERR
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

SHINNERS, HELEN ED
611 NW 97 TERR
PEMBROKE PINES, FL 33024 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: HELEN SHINNERS, EXECUTIVE DIRECTOR

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AZOR, BETH
Address: 1173 SW 37 MANOR
City-St-Zip: DAVIE, FL 33328 US

Title: SECR () Delete
Name: PREZIOSI, KITTY
Address: 9441 HOLLYHOCK CT
City-St-Zip: DAVIE, FL 33328

Title: DIR () Delete
Name: DUTKO, MIKE
Address: 600 S ANDREWS AVE SUITE 500
City-St-Zip: FT LAUDERDALE, FL 33301 US

Title: DIR () Delete
Name: NARDOZZA, FRANK
Address: 401 E LAS OLAS BLVD STE 1400
City-St-Zip: FT LAUDERDALE, FL 33301 US

Title: DIR () Delete
Name: MUSSATTO, DONNA
Address: 9480 POINCIANA PL # 103
City-St-Zip: FT LAUDERDALE, FL 33324 US

Title: DIR () Delete
Name: KIAR, MONROE
Address: 6191 SW 45 ST
City-St-Zip: DAVIE, FL 33314

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:

Title: DIR (X) Change () Addition
Name: BLANTON, KATHY
Address: 6110 SW 186 WAY
City-St-Zip: DAVIE, FL 33332 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: HELEN SHINNERS

ED

04/29/2009

Electronic Signature of Signing Officer or Director

Date