

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005694

FILED  
Jul 05, 2006  
Secretary of State

**Entity Name:** HOPE RECOVERY MINISTRIES, INC.

**Current Principal Place of Business:**

2020 PALM BAY RD NE  
SUITE 1 & 2  
PALM BAY, FL 32905

**New Principal Place of Business:**

**Current Mailing Address:**

1345 N HWY A1A  
205  
INDIALANTIC, FL 32903

**New Mailing Address:**

**FEI Number:** 59-3362082      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

DIXON, WILLIAM H  
2115 PALM BAY RD., NE  
PALM BAY, FL 32905 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PHELPS, RICHARD S  
Address: 1345 N. HWY A1A #205  
City-St-Zip: INDIALANTIC, FL 32903

Title: VD ( ) Delete  
Name: MORRIS, TERRY  
Address: 330 WATSON DRIVE  
City-St-Zip: INDIANLANTIC, FL 32903

Title: TD ( ) Delete  
Name: ERZINGER, LEROY  
Address: 2660 OAKHAVEN ST., NE  
City-St-Zip: PALM BAY, FL

Title: D ( ) Delete  
Name: PRENTICE, TOM  
Address: 3133 WEYBURN AVE SE  
City-St-Zip: PALM BAY, FL 32909

Title: D ( ) Delete  
Name: HOY, JEFFREY D DR  
Address: 524 LA COSTA COURT  
City-St-Zip: MELBOURNE, FL

Title: SD ( ) Delete  
Name: FADDEN, CHRISTOPHER  
Address: 440 MALLARO LANE  
City-St-Zip: INDIALANTIC, FL 329034714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TD (X) Change ( ) Addition  
Name: ERZINGER, LEROY  
Address: 2660 OAKHAVEN ST., NE  
City-St-Zip: PALM BAY, FL 32905

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

Title: D (X) Change ( ) Addition  
Name: HOY, JEFFREY D DR  
Address: 524 LA COSTA COURT  
City-St-Zip: MELBOURNE, FL 32940

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 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: RICHARD S. PHELPS

PRES

07/05/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date