

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90252 036 ****61.25

DOCUMENT # N96000003475

1. Entity Name
THERE IS HOPE IN JESUS OUTREACH CENTER, INC.



Principal Place of Business
4501 N 42 ST
TAMPA, FL 33610

Mailing Address
P.O. BOX 310306
TAMPA, FL 33680

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

04052004

Chg-NP

CR2E037 (10/03)

4. FEI Number
59-3481127

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PASCO, LESLIE
1410 STONECREEK DR
TARPON SPRINGS, FL 34689

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BAKER, BRUCE N
STREET ADDRESS 6209 N 22ND ST
CITY-ST-ZIP TAMPA, FL 33604 ☐ Delete

TITLE D
NAME BAKER, JANICE
STREET ADDRESS 6209 N 22 ST
CITY-ST-ZIP TAMPA, FL 33604 ☐ Delete

TITLE D
NAME PASCO, LESLIE D
STREET ADDRESS 1410 STONECREEK DR
CITY-ST-ZIP TARPON SPRINGS, FL 34689 ☐ Delete

TITLE D
NAME LATIKAR, BAKER
STREET ADDRESS 6209 N 22 ST
CITY-ST-ZIP TAMPA, FL 33604 ☐ Delete

TITLE D
NAME SMITH, DIANE
STREET ADDRESS 4403 N 35TH ST
CITY-ST-ZIP TAMPA, FL 33610 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 21, 2004 / (813) 468-0397 cell

(813) 663-0848 Church
(813) 234-2973 Bruce Baker (H)
(727) 942-9820 - 100110/Home