

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003844

FILED  
Feb 18, 2008  
Secretary of State

**Entity Name:** HOMES OF HOPE INTERNATIONAL, CORP.

**Current Principal Place of Business:**

4340 CLOVERCREST DR  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 1757  
NEW SMYRNA BEACH, FL 32170

**New Mailing Address:**

**FEI Number:** 59-3405011

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAEGER, CYNTHIA  
4340 CLOVERCREST DR  
NEW SMYRNA BEACH, FL 32168 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: PTD ( ) Delete  
Name: JAEGER, CYNTHIA  
Address: 4340 CLOVERCREST DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VPD ( ) Delete  
Name: JAEGER, JOHN  
Address: 4340 CLOVERCREST DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: SD ( ) Delete  
Name: NOWELL, SANDY  
Address: 1841 CAROLINA AVE  
City-St-Zip: ORMOND BEACH, FL 32174

**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:

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:** CYNTHIA JAEGER

PTD

02/18/2008

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

\_\_\_\_\_  
Date