2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# N96000005851

Entity Name: HOPE VISION, INC.

Current Principal Place of Business:

PO BOX 491593
LEESBURG, FL 34749 US

New Principal Place of Business:

2795 SOUTH STREET
LEESBURG, FL 34748 US

Current Mailing Address:

PO BOX 491593
LEESBURG, FL 34749 US

New Mailing Address:

FEI Number: 59-3414881 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, DANNIE
10215 BARRINGTON COURT
LEESBURG, FL 34788 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: WILLIAMS, DANNIE L
Address: 10215 BARRINGTON CT
City-St-Zip: LEESBURG, FL 34788

Title: D ( ) Delete
Name: GRAHAM, SUE A
Address: 1204 BAKER ST.
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete
Name: DIXON, HOWARD P
Address: 1759 WATERVIEW DR.
City-St-Zip: LEESBURG, FL 34749

Title: D ( ) Delete
Name: MOBLEY, LINDA
Address: PO BOX 490511
City-St-Zip: LEESBURG, FL 34749

Title: ST ( ) Delete
Name: PRESLEY, JAMES C
Address: 10218 JOANIES RUN
City-St-Zip: LEESBURG, FL 34788

Title: D ( ) Delete
Name: HAYES, MICHAEL
Address: 331 CHERRY TREE STREET
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: GRAHAM, SUE A
Address: 300 TOMATO HILL ROAD
City-St-Zip: LEESBURG, FL 34748

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:

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: JAMES C. PRESLEY ST 04/02/2009

Electronic Signature of Signing Officer or Director — Date