

2001 UNIFORM BUSINESS REPORT (UBR)

008761

DOCUMENT # N97000000038

1. Entity Name

THERE'S HOPE, INCORPORATED

Principal Place of Business

2257 NW 32ND TERR
LAUDERDALE LAKES FL 33311
US

Mailing Address

P. O. BOX 740756
DALLAS TX 75374

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0716067

Applied For

Not Applicable

5. Certificate of Status Desired

2 \$8.75 Additional
Fee Required 17.50

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRAHAM, DEBORAH
2257 NW 32ND TERRACE
LAUDERDALE LAKES FL 33311

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRAHAM, DEBORAH 2257 NW 32ND LAUDERDALE LAKES FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PRICE, ANGELA 8801 FAIR OAKS AVENUE, #2071 DALLAS TX 75243	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAHAM, JAMES 12410 PLEASANT VALLEY DRIVE DALLAS TX 75243	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SHAN, MEREDITH 12410 PLEASANT VALLEY DR DALLAS TX 75243	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO Same " "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Same " "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 0000004003810-0-0-0 -04/13/01--01013--019 *****78.75 *****78.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Same " "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Same 9911 Whitehurst Drive DALLAS, TX 75243	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

3/7/01 214-570-0004

Date

Daytime Phone #

CR2E037 (10/00)

FILED

01 APR -6 PM 2:17

SECRETARY OF STATE
TALLAHASSEE FLORIDA



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