

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR  
RE STATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 MAY 12 AM 8:12

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



02/18/03 0103-003 #175.10

DOCUMENT # N97000000038

1. Corporation Name

THERE'S HOPE, INCORPORATED

Principal Place of Business

Mailing Address

2257 NW 32ND TERR  
LAUDERDALE LAKES FL 33311  
US

P. O. BOX 740756  
DALLAS TX 75374

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

12/30/1996

5. FEI Number

65-0716067

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PO	GRAHAM, DEBORAH	2257 NW 32ND	LAUDERDALE LAKES FL 33311
TD	PRICE, ANGELA	<del>1001 FAIR CREEK AVENUE #1001</del> 11020 Audelia Rd. #C108	<del>DALLAS TX 75240</del> DALLAS TX. 75243
VD	GRAHAM, JAMES	<del>10110 PLEASANT VALLEY DRIVE</del> 5409 HENITTS COVE	<del>DALLAS TX 75240</del> DALLAS TX. 75089
S	<del>CHAM, MEREDITH</del> LAREDA Jones-Polk	<del>9511 WHITEHORSE DRIVE</del> #115 3605 EASTON MEADOWS	<del>DALLAS TX 75240</del> GARLAND TX 75043
DM	TIONYA HILL	5409 HENITTS COVE	DALLAS TX 75089

700014318847  
05/12/03--01070--003 #61.25

8. Name and Address of Current Registered Agent

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

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

Deborah Graham

REGISTERED AGENT MUST SIGN

Date

02-19-03

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Deborah Graham DEBORAH GRAHAM 02-19-03 214-348-5005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Page 1

CR2E040 (8/02)