2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attach

SIGNATURE:

Feb 14, 2000 8:00 am Secretary of State DOCUMENT # N97000000446 1. Entity Name 02-14-2000 90127 017 ****69.25 C & P. H.O.P.E., FOUNDATION, INC. Principal Place of Business Mailing Address 134 MARTIN CIRCLE 1128 ROYAL PALM BEACH BLVD LOPOMODO ROYAL PALM BEACH FL 33411-1709 **SUITE #339** ROYAL PALM BEACH FL 33411 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 31-1521617 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CRITTENDEN, CELIA 134 MARTIN CIRCLE ROYAL PALM BEACH FL 33411 Zip Code FI 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) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Delete TITLE TITLE NAME NAME CRITTENDEN, CELIA STREET ADDRESS STREET ADDRESS 134 MARTIN CIRCLE CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Change ☐ Addition 🔀 Delete TITLE TITLE SD NAME CRITTENDEN, SHAROLYN NAME STREET ADDRESS STREET ADDRESS 134 MARTIN CIRCLE CITY-ST-ZiP CITY-ST-ZIP ROYAL PALM BEACH FL 33411 Change _ Addition TITLE ☐ Delete TITLE Pierce, Helen C 554 S.E. 3rd Street Belle Glade, FL 33/30 NAME NAME -PIERCE, HELEN C ~ STREET ADDRESS STREET ADDRESS 554 S.E. 3RD STREET CITY-ST-ZIP BELLE GLADE FL 33430 CITY-ST-ZIF Change Addition ☐ Defete TITLE TD_A TITLE Baker, Ronalia B. NAME BKER. RONALIA B NAME 134 Martin Circle STREET ADDRESS STREET ADDRESS 134 MARTIN CIRCLE CITY-ST-ZIP 441 Palm Brach FL 33411 CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Delete TITLE ☐ Change X Addition Gaines, Sibyl L. NAME NAME STREET ADDRESS. STREET ADDRESS Orlando, FL 32824 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 region 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

FILED

561-333-2000