## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000005537

Entity Name: OPERATION HOPE INC.

FILED Jun 22, 2007 Secretary of State

y			
Current Principal Place of Business:		New Principal Place of Business:	
2100 45TH #A4	HST.		
	LM BEACH, FL 33407		
Current Mailing Address:		New Mailing Address:	
2100 45TH	IST.		
	LM BEACH, FL 33407		
In accordan	: 65-0171969 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did n		(X)
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:	
2109 PINE	, KENNETH L HURST DR. LM BEACH, FL 33407 US		
	named entity submits this statement for the e of Florida.	ourpose of changing its registered office or registered agent, o	r both,
SIGNATU	RE:		
	Electronic Signature of Registered Ag	ent Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRE	ECTORS
Title: Name: Address: City-St-Zip:	PD ( ) Delete BURNEY, GERTRUDE 547 W. THIRD ST. RIVIERA BEACH, FL 33404	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	SD ( ) Delete BRYAN, PAULA 8820 N.W. 183RD TER PALMETTO BAY, FL 33157	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	TD () Delete BRADLEY, CYRILLA 1842 NW 94TH AVE. PLANTATION, FL 33322	Title: TD (X) Change ( ) Addition Name: DARRISAW, MARGARET Address: 1580 31ST ST. W. City-St-Zip: RIVIERA BEACH, FL 33404	
Title: Name: Address: City-St-Zip:	VPD ( ) Delete REESE, FRANK 1431 13TH STREET WEST PALM BEACH, FL 33407	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	D ( ) Delete RUSSELL, MATTHEW ESQ. 600 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	D () Delete BROOKS, JACQUELINE DR. 5501 MADISON ST. RIVIERA BEACH, FL 33404	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: GERTRUDE BURNEY PD 06/22/2007