2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2006
Secretary of State

DOCUMENT# N98000001504

Entity Name: BRIDGES OF HOPE, INC.

Current Principal Place of Business:

945 W. KELLER ST.
HERNANDO, FL 34442

New Principal Place of Business:

Current Mailing Address:

945 W. KELLER ST.
HERNANDO, FL 34442

New Mailing Address:

FEI Number: 59-3503071 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VELDWIJK, CLARENA
945 W. KELLER
HERNANDO, FL 34442 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: DP ( ) Delete
Name: VELDWIJK, CLARENA
Address: 945 W. KELLER
City-St-Zip: HERNANDO, FL 34442

Title: TD ( ) Delete
Name: VELDWICK, ROBERTUS
Address: 945 W. KELLER
City-St-Zip: HERNANDO, FL 34442

Title: VD ( ) Delete
Name: CASTELLANOS, DIANA
Address: 8889 FORT JEFFERSON BLVD.
City-St-Zip: ORLANDO, FL 32822

Title: D ( ) Delete
Name: RAMIREZ- VARGAS, ALVARO
Address: 945 W. KELLER STREET
City-St-Zip: HERNANDO, FL 34442

Title: PC ( ) Delete
Name: BRICENO, MAGDA
Address: 945 W KELLER ST
City-St-Zip: HERNANDO, FL 34442

Title: S ( ) Delete
Name: SALTINO, MARY
Address: PO BOX 183
City-St-Zip: FLORAL CITY, FL 34436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change ( ) Addition
Name: VELDWIJK, ROBERTUS
Address: 945 W. KELLER
City-St-Zip: HERNANDO, FL 34442

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

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

Title: PC (X) Change ( ) Addition
Name: CHAVARRO, TULIA
Address: 945 W KELLER ST
City-St-Zip: HERNANDO, FL 34442

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERTUS VELDWIJK TD 03/01/2006

Electronic Signature of Signing Officer or Director — Date