

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002190

FILED
Feb 02, 2009
Secretary of State

Entity Name: THE MOUNTAIN OF HOPE, INC.

Current Principal Place of Business:

393 LAKEVIEW AVENUE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

393 LAKEVIEW AVENUE
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 59-3524142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOE, BRIAN R
3074 WEST LAKE MARY BLVD #136
LAKE MARY, FL 32746 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: PD () Delete
Name: MILLONIG, JOHN
Address: 393 LAKEVIEW AVE.
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: DEDMAN, TYLER
Address: 350 W. LAKEVIEW AVE.
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: RAGSDALE, NORMA
Address: 96 CRYSTAL VIEW S.
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOHN MILLONIG

DP

02/02/2009

Electronic Signature of Signing Officer or Director

Date