

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 27, 2001 8:00 am**  
**Secretary of State**

03-05-2001 90008 022 \*\*\*\*61.25

**DOCUMENT # N98000004931**

1. Entity Name

**THE H.O.P.E. PROJECT CORPORATION**

Principal Place of Business

3401 PGA BOULEVARD  
 SUITE 310  
 PALM BEACH GARDENS FL 33410

Mailing Address

3401 PGA BOULEVARD  
 SUITE 310  
 PALM BEACH GARDENS FL 33410

2. Principal Place of Business

5 Harvard Circle

Suite, Apt. #, etc.

Suite 110

City &amp; State

West Palm Beach, FL

Zip

33409

Country

3. Mailing Address

5 Harvard Circle

Suite, Apt. #, etc.

Suite 110

City &amp; State

West Palm Beach, FL

Zip

33409

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0859412

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

THAYER, KRISTINE J  
 3401 PGA BOULEVARD STE 310  
 WEST PALM BEACH FL 33410

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)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
 NAME THAYER, KRISTINE J  
 STREET ADDRESS 3401 PGA BOULEVARD, #310  
 CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE VD ☒ Delete  
 NAME HADLEY, HOLLY  
 STREET ADDRESS 1025 MILITARY TRAIL STE 113  
 CITY-ST-ZIP JUPITER FL 33458

TITLE STD ☒ Delete  
 NAME KING, BETTYE J ESQ.  
 STREET ADDRESS 625 N. FLAGLER DR., SUITE 501  
 CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE STD ☒ Delete  
 NAME HART, RANDELL  
 STREET ADDRESS 3401 PGA BLVD STE 310  
 CITY-ST-ZIP WEST PALM BEACH FL 33410

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☐ Change ☒ Addition  
 NAME MELANIE BONE  
 STREET ADDRESS 10094 Indian town Rd.  
 CITY-ST-ZIP Jupiter, FL 33478

TITLE STD ☐ Change ☒ Addition  
 NAME KEN PELTZIE  
 STREET ADDRESS 2260 RABBIT HOLLOW CIRCLE  
 CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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 receiver 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)