

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2007 8:00 am
Secretary of State

01-18-2007 90116 031 ****61.25

DOCUMENT # N99000001496	
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1. Entity Name HOPE SEEDS INC.	Principal Place of Business 5174 CR 675 E BRADENTON, FL 34211	Mailing Address 5174 CR 675 E BRADENTON, FL 34211
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2. Principal Place of Business - No P.O. Box # 5250 CR 675 E	3. Mailing Address 5250 CR 675 E
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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01042007 Chg-NP CR2E037 (12/06)

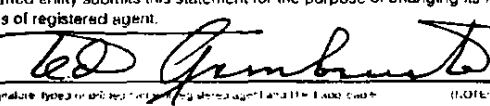
4. FEI Number 65-0911582	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ARMBRUSTER, TED 3760 PINEBROOK CIRCLE, UNIT 1 BRADENTON, FL 34209

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

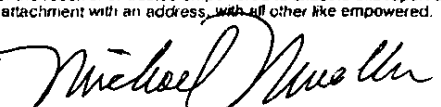
SIGNATURE 	DATE
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	NAME
DC	MUELLER, MICHAEL
STREET ADDRESS	5174 CR 675 E
CITY-STATE-ZIP	BRADENTON, FL 34211
TITLE	NAME
DC	BULTMEYER, RICHARD L
STREET ADDRESS	87 WHIPPOR WILL CT
CITY-STATE-ZIP	ELLENTON, FL 34222
TITLE	NAME
S	ARMBRUSTER, TED
STREET ADDRESS	3760 PINEBROOK CIR UNIT 1
CITY-STATE-ZIP	BRADENTON, FL 34209
TITLE	NAME
VDC	SINNOTT, FRANCIS
STREET ADDRESS	PO BOX 895
CITY-STATE-ZIP	BRADENTON, FL 34281
TITLE	NAME
DTR	SCHLEG, EDWARD C
STREET ADDRESS	4931 88TH ST E
CITY-STATE-ZIP	BRADENTON, FL 34211
TITLE	NAME
STREET ADDRESS	
CITY-STATE-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	NAME
	5250 CR 675 E
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	NAME
	Bultmeyer, Richard
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-STATE-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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  CEO + Executive Director 2/12/07
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