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## 2000 UNIFORM BUSINESS REPORT (UBR)

## Apr 18, 2000 8:00 am Secretary of State DOCUMENT # N99000003809 1. Entity Name MISSION OF HOPE MINISTRY, INC. 03-15-2000 90081 030 \*\*\*\*61.25 04-18-2000 90805 046 \*\*\*\*\*8.75 Principal Place of Business Mailing Address 604 E. GARDEN ST. #4 604 E. GARDEN ST. #4 POSTIC **LAKELAND FL 33805-4647** LAKELAND FL 33905 2. Principal Place of Business. 3. Mailing Address 320 W. CARVER 20 W. COBVER DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State AKELAND FIA. akeland - 3580080 Not Applicable Po LK Country \$8.75 Additional Zipl 5. Certificate of Status Desired POLK Fee Required 3380*5* 13380*5* Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROOSEVELL BARNUM J. BARNUM, ROOSEVELT JR 320 604 E. GARDEN ST. #4 LAKELAND FL 33805 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 SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of redustered agent and title if emplicable Make Check Payable to FILE NOW: Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. D Delete nne ☐ Change ☐ Addition TITLE NAME NAME Lewis, Mack STREET ADDRESS STREET ADDRESS 2026 SOMERVILLE DR. CITY-ST-7IP CITY-ST-ZIP LAKELAND FL 33801 ☐ Addition Change ☐ Delete TITLE TITLE NAME THOMPSON, SHAREESE NAME STREET ADDRESS STREET ADDRESS 2026 SOMERVILLE DR. CITY-ST-ZIP CITY-ST-ZIP Lakeland FL 33801 ☐ Addition ☐ Change TITLE ☐ Defete TITLE HENRY, SUSIE MAE NAME NAME STREET ADDRESS STREET ADDRESS 1121 MARTIN LUTHER KING AVE #49 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33805 ☐ Change Addition Delete TITLE TITLE BARNUM, ROOSEVELT JR NAME NAME STREET ADDRESS STREET ADDRESS 604 E. GARDEN ST. #4° CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33805-4647 ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME BARNUM, EVIT NAME STREET ADDRESS STREET ADDRESS £ .. . 604 E. GARDEN ST #4 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33805-4647 ☐ Addition Change ☐ Delete TITLE TITLE GONZALEZ, ANJANNETTE MAME 如性療法 经间间 STREET ADDRESS 12-806 CEDAR FOREST DR #302 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TAMPA FL 33825 12. I hereby certify that the information supplied with this filling 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. WANGE QUEST H 3/7/2000 (863)682-1916 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR