

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 08, 2002 8:00 am**  
**Secretary of State**

05-08-2002 90087 009 \*\*\*\*78.75

DOCUMENT # N99000003809.

1. Entity Name

Mission of Hope Ministry Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

618 Massachusetts Ave.  
Suite, Apt. #, etc.

3. Mailing Address

3520 CLEVELAND HTS BLVD #140  
Suite, Apt. #, etc.  
#140

DO NOT WRITE IN THIS SPACE

City & State

Lakeland, FLA.

City & State

Lakeland FLA.

4. FEI Number

59-3580080

Applied For

Not Applicable

Zip

33801

Country

POLK

Zip

33803

Country

POLK

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Roosevelt Baernum JR.

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

3520 CLEVELAND HTS BLVD #140

City

Lakeland

FL

Zip Code

33803

**DO NOT WRITE  
IN THIS SPACE**

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

Roosevelt Baernum JR. ROOSEVELT BAERNUM JR.

4-18-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25  
Initial or Amended UBR**

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRES.  
ROOSEVELT BAERNUM  
3520 CLEVELAND HTS BID  
LAKELAND FL 33803

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VICE PRES.  
EVIT BAERNUM  
3520 CLEVELAND HTS BID  
LAKELAND FL 33803

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CHAIRMAN  
MAC LEWIS  
2026 SUMMERVILLE DR.  
LAKELAND, FL 33805

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VICE CHAIRMAN  
SHARRESSE THOMPSON LEWIS  
2026 SUMMERVILLE DR  
LAKELAND, FL 33801

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TREAS.  
GLEX FOWLER  
102-806 CEDAR FORREST DR #302  
TAMPA FL 33625

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SUSIE HENRY DIRECTOR  
SUSIE HENRY  
1121 MARTIN LUTHER KING #49  
LAKELAND, FL 33805

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

CR2E037B (12/01)

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 on an attachment with an address with all other like empowered.

SIGNATURE: Roosevelt Baernum JR. ROOSEVELT BAERNUM JR. 4-18-02 6489707 (863)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Payable To