

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004399

FILED
Mar 25, 2006
Secretary of State

Entity Name: H.O.P.E., INC. OF JACKSONVILLE

Current Principal Place of Business:

435 CLARK ROAD
SUITE 614
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

435 CLARK ROAD
SUITE 614
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 31-1662846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMPSON, JAMES B REV.
9003 POLK AVE.
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

SAMPSON, JAMES B REV.
6149 QUIET COUNTRY LANE.
JACKSONVILLE, FL 32218 US

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:

03/25/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COB () Delete
Name: GRIFFIN, ERNEST
Address: 435 CLARK RD., STE 614
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: LATOUR, ANNETTE
Address: 4835 SOUTEL DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: T () Delete
Name: EDWARDS, DEBRA
Address: 4562 NOTTER AVE
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: MCQUEEN, CYNELL
Address: 4835 SOUTEL DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: P () Delete
Name: SAMPSON, DR. JAMES B REV.
Address: 9003 POLK AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: SAMPSON, JAMIE
Address: 9003 POLK AVE.
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SEC (X) Change () Addition
Name: LATOUR, ANNETTE
Address: 4835 SOUTEL DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: T (X) Change () Addition
Name: EDWARDS, DEBRA
Address: 8891 YEOMAN DR
City-St-Zip: JACKSONVILLE, FL 32208

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

Title: P (X) Change () Addition
Name: SAMPSON, DR. JAMES B REV.
Address: 6149 QUIET COUNTRY LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change () Addition
Name: SAMPSON, JAMIE
Address: 6149 QUIET COUNTRY LANE
City-St-Zip: JACKSONVILLE, FL 32218

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBRA EDWARDS

T

03/25/2006

Electronic Signature of Signing Officer or Director

Date