

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000007002

1. Entity Name

I.C. - H.O.P.E. OF JACKSONVILLE, INC.

FILED
Mar 18, 2002 8:00 am
Secretary of State

03-18-2002 90183 038 *****61.25

Principal Place of Business

Mailing Address

9319 RIDGE BOULEVARD
JACKSONVILLE FL 32208

POST OFFICE BOX 9590
JACKSONVILLE FL 32208

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3623694

Applied For

Not Applicable

Zip

Country

Zip

Country

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

YARBER, LEWIS N.
9319 RIDGE BOULEVARD
JACKSONVILLE FL 32208

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.

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DCO ☐ Delete
NAME YARBER, LEWIS N
STREET ADDRESS 6360 FERBER ROAD
CITY-ST-ZIP JACKSONVILLE FL 32277

TITLE ☐ Change ☒ Addition
NAME ARTHUR L. JOHNSON
STREET ADDRESS 2305 St. Leger Dr.
CITY-ST-ZIP JACKSONVILLE FLA. 32208

TITLE D ☐ Delete
NAME YARBER, NANCY
STREET ADDRESS 6360 FERBER ROAD
CITY-ST-ZIP JACKSONVILLE FL 32277

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

TITLE D ☐ Delete
NAME GOGGINS, CARLA A
STREET ADDRESS 4488 MISTY DAWN COURT S.
CITY-ST-ZIP JACKSONVILLE FL 32277

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

TITLE D ☐ Delete
NAME CALVIN, CECILIA A
STREET ADDRESS 3409 MARLO STREET
CITY-ST-ZIP JACKSONVILLE FL 32209

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

TITLE D ☐ Delete
NAME FRAZIER, GWENDOLYN C
STREET ADDRESS 1635 CARBONDALE DRIVE, N.
CITY-ST-ZIP JACKSONVILLE FL 32208

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

TITLE D ☐ Delete
NAME RICHMOND, VANESSA R
STREET ADDRESS 1735 CAVALCADE COURT
CITY-ST-ZIP JACKSONVILLE FL 32218

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 of Arthur L. Johnson

2/22/02

904-744-0100

CR2E037 (9/01)