2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007002

FILED Mar 17, 2005 Secretary of State

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

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	GE BOULEVARD IVILLE, FL 32208				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	FICE BOX 9590 IVILLE, FL 32208				
FEI Number	: 59-3623694 FE	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Curre	nt Registered Agent:	Name and Address	of New Registered Agent:	
	LEWIS N GE BOULEVARD IVILLE, FL 32208	US			
	e named entity subm e of Florida.	its this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electronic Si	gnature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	DCO () Delet YARBER, LEWIS N 6360 FERBER ROAD JACKSONVILLE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet YARBER, NANCY 6360 FERBER ROAD JACKSONVILLE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet GOGGINS, CARLA A 4488 MISTY DAWN O JACKSONVILLE, FL	COURT S.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet CALVIN, CECILIA A 3409 MARLO STREE JACKSONVILLE, FL	Т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet FRAZIER, GWENDOI 1635 CARBONDALE JACKSONVILLE, FL	LYN C DRIVE, N.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet RICHMOND, VANESS 1735 CAVALCADE C JACKSONVILLE, FL	SA R OURT	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEWIS N YARBER DCO 03/17/2005