

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV 13 PM 3:41

DOCUMENT # 1799000007115

1. Corporation Name

Operation Hope of Brevard, Inc.

2. Principal Office Address

12285 County Rd 512

Suite, Apt. #, etc.

City & State

Fellsmere, FL

Zip

32948

Country

Indian River

3. Mailing Office Address

same

Suite, Apt. #, etc.

same

City & State

same

Zip

Country

REINSTATEMENT 05-06

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

12/06/1999

5. FEI Number

593614249

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Jesse Zermeno

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

1621 Holland St.

Suite, Apt. #, Etc.

City

Melbourne

State

FL

Zip Code

32935

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Jesse Zermeno

REGISTERED AGENT MUST SIGN

Date 11/7/06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|---------------------|
| P | Jesse Zermeno | 1621 Holland St. | Melbourne, FL 32935 |
| VP | Jann Zermeno | 1621 Holland St. | Melbourne, FL 32935 |
| T | Connie Fairbanks | 158 Heck Ln. | Decatur, TN 37322 |
| D | Robert Burger | 345 Bay Point Dr. | Melbourne, FL 32935 |
| D | Hector Martinez | 1660 Country Cove Cir. | Malabar, FL 32950 |
| D | William Parkison | 1080 Kelly Creek Cir. | Oviedo, FL 32765 |

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 118, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Jann Zermeno Jann Zermeno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

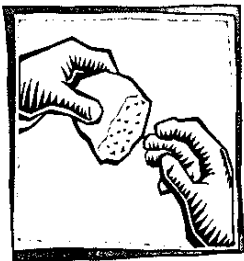
Date

11/7/06

Daytime Phone #

772-571-0003

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Operation Hope

"A brighter tomorrow for the migrant community"

12285 County Road 512
Fellsmere, FL 32948

Phone: 772-571-0003

November 7, 2006

Florida Department of State, Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Dear Florida Department of State, Division of Corporations,

We did not receive notices of 2005 & 2006 Annual Reports. Please note address on form.

Enclosed is a check for the two years: $61.25 \times 2 = \$122.50$.

Thank you for your service.

For Children's Sake,

A handwritten signature in cursive script that reads "Jann Zermeño".

Jann Zermeño
Vice - President
Operation Hope
Enclosures (2)

#9. continued

D James Fairbanks 158 Heck Ln Decatur, TN 37322