

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000091120

Entity Name: NORTHERN HOPE CORP

FILED
Feb 17, 2011
Secretary of State

Current Principal Place of Business:

250 NORTH ORANGE AVE.
SUITE 1250
ORLANDO, FL 32801

New Principal Place of Business:

14 EAST WASHINGTON ST
SUITE 600 C
ORLANDO, FL 32801

Current Mailing Address:

250 NORTH ORANGE AVE.
SUITE 1250
ORLANDO, FL 32801

New Mailing Address:

P. O. BOX 2626
ORLANDO, FL 328022626

FEI Number: 26-3539812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKIE, ROBIN M
250 NORTH ORANGE AVE.
SUITE 1250
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

WILKIE, ROBIN M
14 EAST WASHINGTON ST
SUITE 600 C
ORLANDO, FL 32801 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: ROBIN WILKIE

02/17/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT
Name: WILKIE, ROBIN M
Address: 14 E WASHINGTON ST SUITE 600 C
City-St-Zip: ORLANDO, FL 32801

Title: VP
Name: NAYLOR, KHRISTIAN P
Address: 14 E WASHINGTON ST SUITE 600C
City-St-Zip: ORLANDO, FL 32801

Title: VP
Name: WILKIE, TERRANCE P
Address: 411 SOFT SHADOW LANE
City-St-Zip: DEBARY, FL 32713

Title: S
Name: WILKIE, PATRICIA A
Address: 411 SOFT SHADOW LANE
City-St-Zip: DEBARY, FL 32713

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBIN WILKIE

PRES

02/17/2011

Electronic Signature of Signing Officer or Director

Date