


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90099 008 ****70.00

DOCUMENT # P40979
 1. Entity Name
 CITY OF HOPE, A NONPROFIT CORPORATION



Principal Place of Business
 1055 WILSHIRE BLVD
 12TH FLOOR
 LOS ANGELES, CA 90017 US

Mailing Address
 1500 E. DUARTE RD
 ATTN: TAX & LICENSING #147
 DUARTE, CA 91010

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
 1500 East Duarte Road
 Suite, Apt. #, etc.
 Attn: Tax & Licensing Dept. #151
 City & State
 Duarte, California
 Zip
 91010
 Country
 USA

4. FEI Number
 95-3435919

5. Certificate of Status Desired \$8.75 Additional Fee Required

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND
 PLANTATION, FL 33324

7. Name and Address of New Registered Agent
 Name
 N/A
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ N/A _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOT BLACKWOOD, TERRY 1500 E. DURATE RD DUARTE, CA 91010 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LEVEY, ALAN S 1055 WILSHIRE BLVD., 12 TH FLOOR LOS ANGELES, CA 90017 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KANE, KATHLEEN L 1055 WILSHIRE BLVD., 12TH FLOOR LOS ANGELES, CA 90017 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STONE, ROBERT 1500 E. DURATE RD. LOS ANGELES, CA 90017 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAILEY, DONALD SR 1500 EAST DUARTE RD DUARTE, CA 91010 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO FRIEDMAN, MICHAEL A CEO 1500 EAST DUARTE ROAD DUARTE, CA 91010 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Paul Blodgett**
 Asst. Secretary 01/16/07 (626) 256-4673

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #