FILED

Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90055 017 \*\*\*150.00

 $\Box$ 

This corporation owes the current year Intangible

Name and Address of New Registered Agent

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P98000066765

1. Corporation Name

22

23

City & State

HOPE, RICHARD V JR

195 20TH AVE VERO BEACH FL 32962

THE HOPE COMPANY OF VERO BEACH, INC.

	Principal Place of Business	Mailing Address		11. B. 0111. B. 111. 10010 6110
_	195 20TH AVE VERO BEACH FL 32962	195 20104 AVÉ VERO BEACH FL 32962	DO NOT WRITE IN TH	IIS SPACE
			3. Date Incorporated or Qualifed 07/27/1998	
	2. Principal Place of Business 21 505 DEACHUM BWD.	2a. Mailing Address 26 505 ROA-HUAND RIVD.	4. FEI Number 65 – 0856724	Applie Not A
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Add

いて

VERO BEACH

City & State

Country Zip 30 25 29 9. Name and Address of Current Registered Agent

28

81 Nama

VKA

82

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

6. Election Campaign Financing

Trust Fund Contribution

Personal Property Tax.

83 84 City

Zip Code 85

☐ Yes

Applied For

Fee Required

\$5.00 May Be

Added to Fees

.XNo

Not Applicable \$8.75 Additional

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of fice or registered agent of blinches the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when rainstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change ☐ Addition ΡĎ □ DELETE 1.1 TITLE TITLE HOPE, RICHARD V JR 12 NAME NAME 195 20TH AVE 1.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32962 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE VSD 2.1 TITLE TITLE HOPE, KAREN G 2.2 NAME NAME 195 20TH AVE 2.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32962 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 3.1 TITLE TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 5.1 TITLE TID F 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 6.1 TTTLE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a) attachment with ap address, with all other like empowered.

SIGNATURE:

urwawa equired SOUNG OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF

CR2F034-(11/08)