

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726248

Entity Name: HOPE EVANGELICAL LUTHERAN CHURCH OF WEST PALM BEACH, FLORIDA, INC.**Current Principal Place of Business:**7430 BELVEDERE ROAD
WEST PALM BEACH, FL 33411**Current Mailing Address:**7430 BELVEDERE ROAD
WEST PALM BEACH, FL 33411 US**FEI Number: 59-1444638****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BOGGS, JOHN PASTOR
7430 BELVEDERE ROAD
WEST PALM BEACH, FL 33411 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: JOHN BOGGS****03/04/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	T
Name	COTTRELL, BRIAN
Address	10807 WHARTON WAY
City-State-Zip:	WEST PALM BEACH FL 33412

Title	DIRECTOR
Name	GUARD, MARK
Address	8211 CALABRIA LAKES DRIVE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	PRESIDENT
Name	SMITH, DAN
Address	2492 VICARA CT.
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	DIRECTOR
Name	FRANCOIS, DEREK
Address	11 CARDIFF WAY
City-State-Zip:	BOYNTON BEACH FL 33426

Title	ASST. SECRETARY
Name	HANNON, TIM
Address	461 SUNRISE WAY
City-State-Zip:	JUNO BEACH FL 33408

Title	DIRECTOR
Name	BALZA, DAVE
Address	129 SARONA CIRCLE
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	DIRECTOR
Name	CLIFF, ROY
Address	2137 RESTON CIRCLE
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	DIRECTOR
Name	GOULD, MICHAEL
Address	2250 SAPPHIRE CIRCLE
City-State-Zip:	WEST PALM BEACH FL 33411

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

SIGNATURE: BRIAN D COTTRELL**TREASURER****03/04/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	DOBBELS, KIP
Address	5470 TORONTO ROAD
City-State-Zip:	HAVERHILL FL 33415