

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Apr 04, 2016
Secretary of State
CC8343850355

Entity Name: NEW HOPE INC. IN SOUTHWEST RANCHES

Current Principal Place of Business:

6201 S.W. 160TH AVE.
SOUTHWEST RANCHES, FL 33331

Current Mailing Address:

6201 S.W. 160TH AVE.
SOUTHWEST RANCHES, FL 33331 US

FEI Number: 59-1843522

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSON, MATTHEW CREV
3884 HERON RIDGE LANE
WESTON, FL 33331 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BRECENO, JULIO
Address 19161 NW 77 CT
City-State-Zip: MIAMI FL 33015

Title PD
Name LARSON, MATTHEW C
Address 3884 HERON RIDGE LANE
City-State-Zip: WESTON FL 33331

Title T
Name DIAMOND, WILLIAM
Address 15906 WAVERLY MANOR
City-State-Zip: DAVIE FL 33331

Title DIRECTOR
Name COLINDRES, ERIC
Address 18631 NORTHWEST 56TH AVE
City-State-Zip: MIAMI GARDEN FL 33055

Title SECRETARY
Name THOMAS, JACOB
Address 3880 HERON RIDGE LANE
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name SUE GANSKE
Address 16101 EMERALD ESTATES DR. #256
City-State-Zip: WESTON FL 33331

Title DIRECTOR
Name TOM, EDWARD JR.
Address 5025 SW 89TH AVE.
City-State-Zip: COOPER CITY FL 33328

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: MATTHEW C LARSON

PRESIDENT

04/04/2016

Electronic Signature of Signing Officer/Director Detail

Date