

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010658

Entity Name: ONEHOPE, INC.**Current Principal Place of Business:**600 SW 3RD ST
POMPANO BEACH, FL 33060**Current Mailing Address:**600 SW 3RD ST
POMPANO BEACH, FL 33060 US**FEI Number: 27-1398241****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PAUL R. ALFIERI, P.L.
5143 NW 42 TERRACE
COCONUT CREEK, FL 33073 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, PRESIDENT
Name HOSKINS, ROB
Address 600 SW 3RD STREET
City-State-Zip: POMPANO BEACH FL 33060

Title EVP
Name RIFKA, MARWAN
Address 600 SW 3RD STREET
City-State-Zip: POMPANO BEACH FL 33060

Title SECRETARY
Name BRASINGTON, DEE
Address 600 SW 3RD STREET
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name CHAMPION, JOE
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR, CHAIRMAN
Name BERKEY, DALE
Address 600 SW 3RD STREET
City-State-Zip: POMPANO BEACH FL 33060

Title TREASURER
Name LARIA, JON
Address 600 SW 3RD STREET
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name BYKER, DAVID
Address 600 SW 3RD STREET
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name PINTO, RYAN
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

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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: ROB HOSKINS**PRESIDENT****04/05/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TCHIVIDJIAN, STEPHAN
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name HAAS, CAROLYN
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name GRUENEWELD, BOBBIE
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name LAING, BARRIE
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name HOSKINS, BOB
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR
Name BUTRIN, JOANN
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060

Title DIRECTOR, VC
Name GOMES, CHARLES
Address 600 SW 3RD ST
City-State-Zip: POMPANO BEACH FL 33060