

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000012063

**Entity Name:** LADY FLORENCE MKPARU MEMORIAL HOUSE OF HOPE INC.

**Current Principal Place of Business:**

16128 HUTCHISON ROAD  
TAMPA, FL 33625

**Current Mailing Address:**

16128 HUTCHISON ROAD  
TAMPA, FL 33625

**FEI Number:** 27-1540655

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

EZIIKE-MKPARU, ONYEKACHUKWU  
16128 HUTCHISON ROAD  
TAMPA, FL 33625 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            O  
Name            EZIKE-MKPARU, ONYEKACHUKWU  
Address        16128 HUTCHISON ROAD  
City-State-Zip: TAMPA FL 33625

*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:** ONYEKACHUKWU EZIKE-MKPARU

**DIRECTOR**

**04/29/2013**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date