

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000003108

**Entity Name:** PROMISES OF HOPE INC.

**Current Principal Place of Business:**

12841 SAULSTON PLACE  
HUDSON, FL 34669

**Current Mailing Address:**

POST OFFICE BOX 5873  
HUDSON, FL 34674-5873 US

**FEI Number:** 46-0526945

**Certificate of Status Desired:** No

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

HILLIARD, ASA S.  
12841 SAULSTON PLACE  
HUDSON, FL 34669 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:** DREW GRUBBS

04/29/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HILLIARD, ASA  
Address POST OFFICE BOX 5873  
City-State-Zip: HUDSON FL 34674-5873

Title T  
Name HILLIARD, SHELLEY M  
Address 12841 SAULSTON PLACE  
City-State-Zip: HUDSON FL 34669

Title S  
Name MCCULLEN, NANCY K  
Address 28600 BENNINGTON DRIVE  
City-State-Zip: WESLEY CHAPEL FL 33544

*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:** SHELLEY HILLIARD

**TREASURER**

04/29/2025

Electronic Signature of Signing Officer/Director Detail

Date