

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000009666

**FILED  
Mar 14, 2016  
Secretary of State  
CC0477499333**

**Entity Name:** TIDES OF HOPE FOUNDATION, INC.

**Current Principal Place of Business:**

3745 FIELDSTONE BLVD.  
#1104  
NAPLES, FL 34109

**Current Mailing Address:**

3745 FIELDSTONE BLVD.  
#1104  
NAPLES, FL 34109

**FEI Number: 47-3667475**

**Certificate of Status Desired: No**

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

GRABINSKI, MATTHEW L  
4001 TAMIAMI TRAIL N.  
SUITE #300  
NAPLES, FL 34109 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 DP  
Name CIMINO, MARILYN  
Address 3745 FIELDSTONE BLVD., #1104  
City-State-Zip: NAPLES FL 34109

Title D  
Name GRABINSKI, MATTHEW L  
Address 253 WILLOUGHBY DRIVE  
City-State-Zip: NAPLES FL 34110

Title D  
Name CIMINO, CAITLIN  
Address 3745 FIELDSTONE BLVD., #1104  
City-State-Zip: NAPLES FL 34109

*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 L. GRABINSKI**

**DIRECTOR**

**03/14/2016**

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

\_\_\_\_\_  
Date