

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000012067

Entity Name: HOPE OF DELIVERANCE ORPHANAGE II, INC.**Current Principal Place of Business:**2305 CEDAR GARDEN DRIVE
ORLANDO, FL 32824**Current Mailing Address:**2305 CEDAR GARDEN DRIVE
ORLANDO, FL 32824 US**FEI Number:** 47-2202335**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MORTON, MYLIKA
809 HANKINS CIR
ORLANDO, FL 32805 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	P
Name	EMILIEN, MARC R
Address	2305 CEDAR GARDEN DRIVE
City-State-Zip:	ORLANDO FL 32824

Title	S
Name	TELUS, PHILOMEN
Address	2305 CEDAR GARDEN DRIVE
City-State-Zip:	ORLANDO FL 32824

Title	D
Name	ISMA, RONALD
Address	2305 CEDAR GARDEN DR
City-State-Zip:	ORLANDO FL 32824

Title	VP
Name	EMILIEN, SCHNEIDER
Address	2305 CEDAR GARDEN DRIVE
City-State-Zip:	ORLANDO FL 32824

Title	T
Name	MORTON, MYLIKA
Address	809 HANKINS CIR
City-State-Zip:	ORLANDO FL 32805

Title	D
Name	TERVIL, JEAN C
Address	2305 CEDAR GARDEN DR
City-State-Zip:	ORLANDO FL 32824

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: MYLIKA MORTON**TREASURER****05/01/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date