2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2019
Secretary of State
3010634514CC

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Entity Name: HOPE CLINIC INC

Current Principal Place of Business:

108 NORTH PINE AVE
OCALA, FL 34475

Current Mailing Address:

108 NORTH MAGNOLIA AVE
SUITE 324
OCALA, FL 34475 US

FEI Number: 81-1525260

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GROW, CINDY A
108 NORTH PINE AVE
OCALA, FL 34475 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	Title	VP
Name	GROW, CINDY A	Name	GROW, MATTHEW A
Address	108 NORTH PINE AVE	Address	108 NORTH PINE AVE
City-State-Zip:	OCALA FL 34475	City-State-Zip:	OCALA FL 34475

Title	SEC
Name	EPISCOPO, ANN M
Address	108 NORTH PINE AVE
City-State-Zip:	OCALA FL 34475

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: CINDY A GROW OWNER 06/16/2019

Electronic Signature of Signing Officer/Director Detail — Date