2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2018
Secretary of State
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Entity Name: HOPE FOR CHILDREN, INC. - A PROMISE FOR HAITI

Current Principal Place of Business:

11017 SUNSET RIDGE CIRCLE
BOYNTON BEACH,, FL 33473

Current Mailing Address:

11017 SUNSET RIDGE CIRCLE
BOYNTON BEACH,, FL 33473 US

FEI Number: 47-4716842

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JULMICE, JAMES
11017 SUNSET RIDGE CIRCLE
BOYNTON BEACH,, FL 33473 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	JULMICE, JAMES
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

Title	S
Name	CADET, KISHA
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

Title	M
Name	JULMICE, SABRINA
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

Title	OFFICER
Name	MCKENZIE, LOVE
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

Title	VP
Name	JULMICE, JOSEE
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

Title	T
Name	CHERENFANT, ELSIE
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

Title	M
Name	JULMICE, WILKING
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

Title	OFFICER
Name	MCKENZIE, ADELINE
Address	11017 SUNSET RIDGE CIRCLE
City-State-Zip:	BOYNTON BEACH, FL 33473

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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: JAMES JULMICE PRESIDENT 04/25/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	OFFICER
Name	DUVERGER, KARINE
Address	9073 VINEYARD LAKE DRIVE
City-State-Zip:	PLANTATION FL 33324