

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000010816

**Entity Name:** CHAPLAINS INTERNATIONAL INSTITUTE OF HOPE INC.

**Current Principal Place of Business:**

1290 E NORMANDY BLYD  
DELTONA, FL 32725

**Current Mailing Address:**

1290 E NORMANDY BLVD  
DELTONA, FL 32725 US

**FEI Number: 80-4031301**

**Certificate of Status Desired: No**

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

IRIZARRY, MIGUEL SR.  
1290 E NORMANDY BLVD  
DELTONA, FL 32725 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: MIGUEL IRIZARRY**

**05/04/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name JOSE MALAVE  
Address 1290 E NORMANDY BLYD  
City-State-Zip: DELTONA FL 32725

Title C  
Name ANGELICA MALAVE  
Address 1290 E NORMANDY BLYD  
City-State-Zip: DELTONA FL 32725

Title C  
Name DEATON, TONY  
Address P.O. BOX 581  
City-State-Zip: MOUNT DORA FL 32756

Title P,CEO  
Name IRIZARRY, MIGUEL  
Address 507 SABAL PALM CIR  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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: MIGUEL IRIZARRY, SR.**

**PRESIDENT**

**05/04/2019**

Electronic Signature of Signing Officer/Director Detail

Date