

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000007173

Entity Name: BELIZEAN HOPE, INC.**Current Principal Place of Business:**5836 SANDSTONE WAY
JACKSONVILLE, FL 32258**Current Mailing Address:**911 PREAKNESS DR
ALPHARETTA, GA 30022 US**FEI Number: 82-2490903****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**HOPE, PAUL
5836 SANDSTONE WAY
JACKSONVILLE, FL 32258 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	PRESIDENT
Name	HOPE, PAUL A
Address	5836 SANDSTONE WAY
City-State-Zip:	JACKSONVILLE FL 32258

Title	VP
Name	CASTILLO, NISEAN O
Address	3878 E 99TH CIRCLE
City-State-Zip:	THORNTON CO 80229

Title	DIRECTOR
Name	PALACIO, DARINA PHD
Address	3878 E 99TH CIRCLE
City-State-Zip:	THORNTON CO 80229

Title	TREASURER
Name	HAUGHTON, DANIEL A PHD
Address	16035 N 10TH ST
City-State-Zip:	PHOENIX AZ 85022

Title	SECRETARY
Name	HAUGHTON, SASHARIE
Address	16035 N 10TH ST
City-State-Zip:	PHOENIX AZ 85022

Title	OFFICER
Name	PALACIO, NISSAN
Address	8705 GLEN OAKS WAY
City-State-Zip:	SANTEE CA 92071

Title	OFFICER
Name	PALACIO, KHAIDIA
Address	8705 GLEN OAKS WAY
City-State-Zip:	SANTEE CA 92071

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: PAUL HOPE**PRESIDENT****05/20/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date