

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000002264

Entity Name: COMMUNITY OF VISION AND HOPE CORP.**Current Principal Place of Business:**13282 LONG CYPRESS TRL
JACKSONVILLE, FL 32223**Current Mailing Address:**13282 LONG CYPRESS TRL
JACKSONVILLE, FL 32223 US**FEI Number: 83-2200766****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WALTERS, ROSEMARIE
13282 LONG CYPRESS TRL
JACKSONVILLE, FL 32223 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	WALTERS, ROSEMARIE
Address	13282 LONG CYPRESS TRL
City-State-Zip:	JACKSONVILLE FL 32223

Title	VP
Name	WALTERS, EZRA
Address	13282 LONG CYPRESS TRL
City-State-Zip:	JACKSONVILLE FL 32223

Title	DIR
Name	WALTERS, JONATHAN
Address	13282 LONG CYPRESS TRL
City-State-Zip:	JACKSONVILLE FL 32223

Title	DIR
Name	WALTERS, BRYAN
Address	13282 LONG CYPRESS TRL
City-State-Zip:	JACKSONVILLE FL 32223

Title	DIR
Name	WALTERS, MICHAEL
Address	13282 LONG CYPRESS TRL
City-State-Zip:	JACKSONVILLE FL 32223

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: EZRA WALTERS**VP****02/01/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date