

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29233

Entity Name: NEW HOPE CHARITIES, INC.**Current Principal Place of Business:**626 NORTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33401**Current Mailing Address:**626 NORTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33401**FEI Number:** 65-0128327**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SADLER, BENJAMIN
ONE NORTH CLEMATIS ST.
SUITE 200
WEST PALM BEACH, FL 33401 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:** BENJAMIN SADLER

05/12/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DC
Name FANJUL, JOSE F.
Address ONE NORTH CLEMATIS ST STE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title DVT
Name LONDONO, ALEJANDRO
Address ONE NORTH CLEMATIS ST STE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name CARNEY, THOMAS F.
Address ONE N CLEMATIS ST STE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title DP
Name O'NEILL, PATRICK REV.
Address ONE NORTH CLEMATIS ST STE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title DP
Name FANJUL DE AZQUETA, LILLIAN
Address ONE NORTH CLEMATIS ST STE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name KLOCK, JOSEPH P.
Address ONE NORTH CLEMATIS ST STE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name GOLDSMITH, GERALD
Address ONE NORTH CLEMATIS ST.
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name AMBASSADOR, EDWARD ELLIOTT
ELSON
Address ONE NORTH CLEMATIS ST.
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Continues on page 2

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: ALEJANDRO LONDONO

DVT

05/12/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DUVALL, M. WALKER
Address 980 N. FEDERAL HWY,
SUITE 100
City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR
Name RINKER, RUBY S.
Address 626 NORTH DIXIE HIGHWAY
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name CANER, JULIA M.
Address 5355 TOWN CENTER RD.
SUITE 300
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR
Name BONE, BILL
Address 550 S. QUADRILLE BLVD.
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR
Name BLOCK, ELLEN
Address 626 NORTH DIXIE HIGHWAY
City-State-Zip: WEST PALM BEACH FL 33401