

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000050070

Entity Name: THE H.O.P.E. PROGRAM, LLC

Current Principal Place of Business:

25501 TROST
#876
BONITA SPRINGS, FL 34135

Current Mailing Address:

25501 TROST
#876
BONITA SPRINGS, FL 34135

FEI Number: 46-3970137

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELFGAUW, JOSEPH R
25501 TROST
#876
BONITA SPRINGS, FL 34135 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

Authorized Person(s) Detail :

Title OWNER / MEMBER
Name DELFGAUW, JOE
Address 25501 TROST
 #876
City-State-Zip: BONITA SPRINGS FL 34135

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOE DELFGAUW

OWNER/MEMBER

03/08/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date