


NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 842003 (6)
1. Corporation Name
HOPE COLLEGE, INC.



Principal Place of Business: ADMINISTRATION BLDG. HOPE COLLEGE HOLLAND MI 49423
Mailing Address: ADMINISTRATION BLDG. HOPE COLLEGE HOLLAND MI 49423

3. Date Incorporated or Qualified: 12/07/1976
3a. Date of Last Report: 02/05/1996

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-sections for Suite, City & State, Zip, and Country.

4. FEI Number: 38-1381271
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	JACOBSON, JOHN H.	<i>officer</i>
STREET ADDRESS	HOPE COLLEGE	
CITY-ST-ZIP	HOLLAND MI	
TITLE	VCD	<input checked="" type="checkbox"/> DELETE
NAME	MILLER, PHILLIP	
STREET ADDRESS	860 E. MAIN	
CITY-ST-ZIP	ZEELAND MI	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	ANDERSON, WILLIAM K	<i>officer</i>
STREET ADDRESS	4491-168TH	
CITY-ST-ZIP	HOLLAND, MI 0	
TITLE	C	<input type="checkbox"/> DELETE
NAME	CAMPBELL, J. KERMIT	<i>Director</i>
STREET ADDRESS	2303 SUSNET BLUFF	
CITY-ST-ZIP	HOLLAND MI	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	BOERSMA, MAX D.	<i>Director</i>
STREET ADDRESS	319 WALNUT CT	
CITY-ST-ZIP	HOLLAND MI	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	Vice Chair of Board <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Rev. Frederick Kruthof <i>Director</i>
2.3 STREET ADDRESS	2920 Bronson Blvd
2.4 CITY-ST-ZIP	Kalamazoo, MI 49008
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John W. Jacobson* **REQUIRED** Date: 1-13-97 Daytime Phone #: (616) 395-7810

SIGNATURE: *Shelley Jones* **REQUIRED** Date: 1/23/97 Daytime Phone #: (407) 842-3165

CR2E037 (9/96)