

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000005495

**Entity Name:** NEW HOPE COALITION, INC

**Current Principal Place of Business:**

7215 1ST AVE WEST  
BRADENTON, FL 34209

**Current Mailing Address:**

7215 1ST AVE WEST  
BRADENTON, FL 34209 US

**FEI Number:** 45-5356622

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CHARLES, BYRON RALPH ODMAN MA  
4000 20TH STREET WEST  
APT 206  
BRADENTON, FL 34205 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:** BYRON RALPH ODMAN CHARLES

02/22/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN / MANAGING  
Name CHARLES, BYRON RALPH ODMAN MA  
Address 4000 20TH STREET WEST  
APT 206  
City-State-Zip: BRADENTON FL 34205

Title TREASURER  
Name PRESMY, LEBIEN BS.  
Address 6315 4TH ST SO  
City-State-Zip: ST PETE FL 33705

Title HAITI MANAGING DIRECTOR  
Name ELUCIEN, BERTHONY MA.  
Address 3170 AIRMAN DR  
City-State-Zip: FORT PIERCE FL 34946

Title SECRETARY  
Name ST FLEUR, JN RONALD BTH.  
Address 6210 SW 3RD ST  
City-State-Zip: MARGATE FL 33068

Title MENTOR AT LARGE  
Name JEAN BAPTISTE, WADESTRANT DR.  
Address 3170 AIRMANS DRIVE  
City-State-Zip: FORT-PIERCE FL 34946

Title COMMUNICATION MANAGER  
Name HASBROUCK, KARL BS.  
Address 7215 1ST AVE WEST  
City-State-Zip: BRADENTON FL 34209

Title EXECUTIVE COORDINATOR CHURCH  
Name XAVIER, ALAIN BTH.  
Address 7215 1ST AVE WEST  
City-State-Zip: BRADENTON FL 34209

Title SOCIAL ENTREPRENEURSHIP  
MANAGING  
Name VOLCY, JEAN BAPTISTE MA.  
Address 7215 1ST AVE WEST  
City-State-Zip: BRADENTON FL 34209

**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:** BYRON RALPH ODMAN CHARLES

CHAIRMAN MANAGING

02/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title FUNDRAISING DIRECTOR  
Name DEVY , HYANIQUE BA.  
Address 437 JACKSON AVE  
City-State-Zip: ELIZABETH NJ 07201

Title ACADEMIC DEAN  
Name LEDBETTER, TONY DR.  
Address 7215 1ST AVE WEST  
City-State-Zip: BRADENTON FL 34209