

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000006233

**Entity Name:** PILLAR OF HOPE, INC.**Current Principal Place of Business:**319 WEST MAIN STREET  
SUITE B  
APOPKA, FL 32712**Current Mailing Address:**P.O. BOX 685  
APOPKA, FL 32704**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PACHECO, THAIS N  
319 WEST MAIN STREET  
SUITE B  
APOPKA, FL 32712 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	PRESIDENT
Name	PACHECO, THAIS N
Address	P.O. BOX 685
City-State-Zip:	APOPKA FL 32704

Title	VP
Name	PACHECO RODRIGUEZ JR., LEONARDO
Address	P.O. BOX 685
City-State-Zip:	APOPKA FL 32704

Title	EXECUTIVE SECRETARY
Name	PACHECO-WILLIAMS, SABDY L
Address	P.O. BOX 685
City-State-Zip:	APOPKA FL 32704

Title	TREASURER
Name	WRIGHT, KINDRA
Address	6021 NEELY FARM DR.
City-State-Zip:	PEACHTREE CORNERS GA 30092

Title	PASTOR
Name	ROBERTS, VERNON
Address	6336 ROYAL TERN ST.
City-State-Zip:	APOPKA FL 32810

*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:** THAIS N PACHECO**PRESIDENT****04/26/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date