

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729206

FILED  
Mar 01, 2006  
Secretary of State

**Entity Name:** NEW HOPE FELLOWSHIP A CHURCH OF THE NAZARENE, INC.

**Current Principal Place of Business:**

3900 SW 48TH AVENUE  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

**Current Mailing Address:**

3900 SW 48TH AVENUE  
PALM CITY, FL 34990 US

**New Mailing Address:**

**FEI Number:** 59-1573575

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DURHAM, GARY L DR.  
172 SE CRESTWOOD CIRCLE  
STUART, FL 34997 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DS ( ) Delete  
Name: ACRE, STEVE  
Address: 7930 SE CROSSRIP STREET  
City-St-Zip: HOBE SOUND, FL 33455

Title: P ( ) Delete  
Name: DURHAM, GARY L DR.  
Address: 172 SE CRESTWOOD CIRCLE  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: CARTER, EDEAR  
Address: 4554 SE BRIDGETOWN COURT  
City-St-Zip: STUART, FL 34997

Title: T ( ) Delete  
Name: JACKSON, JERRY  
Address: 1271 SW EVERGREEN LN  
City-St-Zip: PALM CITY, FL 34990

Title: SD ( ) Delete  
Name: ENGBRETSSEN, SHAWN  
Address: 1825 NW BRIGHT RIVER POINT  
City-St-Zip: STUART, FL 34994

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY L. DURHAM

P

03/01/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date