

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752395

FILED
Apr 29, 2009
Secretary of State

Entity Name: HOPE COMMUNITY FELLOWSHIP OF THE ASSEMBLIES OF GOD OF THE CITY OF TITUSVILLE OF THE STATE OF FLORIDA, INC.

Current Principal Place of Business:

2929 OLD CHANEY HIGHWAY
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

2929 OLD CHANEY HIGHWAY
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-2410749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HACKENBERG, ROGER II
2929 OLD CHANEY HWY
TITUSVILLE, FL 32780 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: D () Delete
Name: ALI, ORAL
Address: 931 YORKTOWNE DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: SIMPSON, RUFUS
Address: 4203 GROVEWOOD LN
City-St-Zip: TITUSVILLE, FL 32780

Title: ST () Delete
Name: SIDNEY, TAYLOR
Address: 4125 HEMLOCK LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: D (X) Delete
Name: MILLER, BENNIE
Address: 2895 KINGFISHER WAY
City-St-Zip: MIMS, FL 32754

Title: PD () Delete
Name: HACKENBERG, ROGER II
Address: 2929 CHEVEY HIGHWAY
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: CARROLL, SHAWN
Address: 687 MASON RIVER
City-St-Zip: TITUSVILLE, FL 32780

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: SIDNEY M. TAYLOR

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04/29/2009

Electronic Signature of Signing Officer or Director

Date