## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

**NEW HOPE PENTECOSTAL CHURCH, INC.** 

Principal Place of Business	Mailing Address	
920 GANO AVENUE ORANGE PARK FL 32073	920 GANO AVENUE ORANGE PARK FL 32073	
2. Principal Place of Business	2a. Mailing Address	

**FILED** Feb 05 1998 8:00am Secretary of State



Applied For

3. Date Incorporated or Qualified 10/20/1982

4. FEI Number

City & State  City & State  7. Is this nonprofit corporation owe  Zip  Country  Zip  Country  8. This corporation owe	nancing on	S5.00 Added to the sassociation of the sassoci	o Fees on? tangible No Code
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	nancing on	S5.00 Added to the sassociation of the sassoci	May Be o Fees on? tangible No Code
Trust Fund Contribution  City & State  City & State  Zip  Zip  Zip  Country  Zip  Country  Zip  Country  Zip  Country  B. This corporation owe Personal Property Ta  Personal Property Ta  Name and Address of Current Registered Agent  THOMPSON, LUCIOUS W  1907 MILLER STREET  ORANGE PARK FL 32073  B1 Name  82 Street Address (P.O. Box Number is Noted to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he 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 tile if applicable (NOTE: Registered Agent aignsture required when reinstaling)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES  TITLE  PD D DELETE  THOMPSON, LUCIOUS W.  12 NAME  THOMPSON, LUCIOUS W.  1907 MILLER ST  ORANGE PARK FL 32073  TITLE  PD D DELETE  21 TITLE  PD D DELETE  31 TITLE  31 TITLE  PD D DELETE  31 TITLE  31 TITLE  PD D DELETE  31 TITLE	on pration a homeown Yes or has paid the ox due June 30.  of New Registered the Acceptable.	Added the ners association of the ners as a second of the ners as a second of the nervision of the nervis	o Fees on? tangible No Code
City & State  Zip  Zip  Country  Zip  Country  Zip  Country  30  Country  8. This corporation owe Personal Property Ta  9. Name and Address of Current Registered Agent  10. Name and Address  THOMPSON, LUCIOUS W  1907 MILLER STREET  ORANGE PARK FL 32073  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he agent	oration a homeowing Yes s or has paid the ox due June 30. of New Registers t Acceptable)  In for the purpose reby accept the a	ners association  O TO  Current year In  Yes  Agent  85 Zip  e of changing in	tangible No Code
Zip Country Zip Country Zip Country As. This corporation owe Personal Property Ta 9. Name and Address of Current Registered Agent 10. Name Address (P.O. Box Number is Not 10. Name and Address Of Current Registered Agent 10. Name Street Address (P.O. Box Number is Not 10. Name and Address Of Current Registered Agent 10. Name Street Address (P.O. Box Number is Not 10. Name and Address (P.O. Box Number is Not 10. Name Address (P.O. Box Number is Not 10. Name and	Yes or has paid the of due June 30.  of New Registered the Acceptable)  It Acceptable)	current year in Yes Ed Agent	tangible No Code
Zip Country Zip Country Zip Country Age 30 Stribe corporation owe Personal Property Ta 9. Name and Address of Current Registered Agent 10. Name and Address THOMPSON, LUCIOUS W 1907 MILLER STREET ORANGE PARK FL 32073 83 Street Address (P.O. Box Number is Not office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he apont. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE Signature, typed or printed name of registered agent and tile II applicable. (NOTE: Registered Agent eignature required when reinstaling)  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE PD DELETE 1.1 TITLE NAME THOMPSON, LUCIOUS W. 1.2 NAME THOMPSON, LUCIOUS W. 1.3 STREET ADDRESS ORANGE PARK FL 32073 1.4 CITY-ST-ZIP ORANGE PARK FL 32073 1.4 CITY-ST-ZIP ORANGE PARK FL 32073 2.2 HAME STREET ADDRESS 1907 MILLER ST 2.3 STREET ADDRESS 1907 MILLER ST 3.3 TITLE	s or has paid the c k due June 30. of New Registere t Acceptable)  In the purpose reby accept the a	current year In Yes [ od Agent Zip e of changing i	No Code
28	t Acceptable)  It Acceptable)  It for the purpose reby accept the a	Yes Ped Agent  85 Zip e of changing i	No Code
THOMPSON, LUCIOUS W 1907 MILLER STREET ORANGE PARK FL 32073  82 Street Address (P.O. Box Number is Not Beautiful and the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. The agent is am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or privated name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES  TITLE PD DELETE 1.1 TITLE  PD DELETE 1.1 STREET ADDRESS  DRANGE PARK FL 32073  14.4 CITY-ST-ZIP  TITLE PO DELETE 2.1 TITLE  NAME THOMPSON, ESSIE LEE  STREET ADDRESS 1907 MILLER ST 2.2 NAME  STREET ADDRESS 1907 MILLER ST 2.3 STREET ADDRESS  CITY-ST-ZIP ORANGE PARK FL 32073  12. 2 A CITY-ST-ZIP  TITLE PO DELETE 3.1 TITLE  DELETE 3.1 TITLE  DELETE 3.1 TITLE	t Acceptable)  Fint for the purpose reby accept the a	85 Zip	ts registered
THOMPSON, LUCIOUS W 1907 MILLER STREET ORANGE PARK FL 32073  11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this stateme office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he 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 tile it applicable.  OFFICERS AND DIRECTORS  TITLE PD DELETE 1.1 TITLE NAME THOMPSON, LUCIOUS W. 1.2 NAME STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073  TITLE PD DELETE 2.1 TITLE PD THOMPSON, ESSIE LEE STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073  TITLE DELETE 3.1 TITLE 2.2 NAME STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073  TITLE DELETE 3.1 TITLE  DELETE 3.1 TITLE	nt for the purpose reby accept the a	of changing i	ts registered
1907 MILLER STREET  ORANGE PARK FL 32073  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statemed office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and title II applicable. (NOTE: Registered Agent eignature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES  TITLE  PD  THOMPSON, LUCIOUS W.  12. NAME  STREET ADDRESS  CITY-ST-ZIP  ORANGE PARK FL 32073  1.4 CITY-ST-ZIP  TITLE  PO  DELETE  1.1 TITLE  PO  DELETE  2.1 TITLE  PO  THOMPSON, ESSIE LEE  1.2 NAME  1.3 STREET ADDRESS  2.3 STREET ADDRESS  CITY-ST-ZIP  ORANGE PARK FL 32073  2.4 CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  3.1 TITLE  DELETE  3.1 TITLE	nt for the purpose reby accept the a	of changing i	ts registered
1907 MILLER STREET ORANGE PARK FL 32073  83  84 City  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statemed office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he 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 II applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES  TITLE PD	nt for the purpose reby accept the a	of changing i	ts registered
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he 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 II applicable. (NOTE: Registered Agent algoriture required when reinstating)  12. OFFICERS AND DIRECTORS  TITLE  PD	nt for the purpose reby accept the a	of changing i	ts registered
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statemed office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he 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)     12.	nt for the purpose reby accept the a	of changing i	ts registered
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statemed office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he 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)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES  TITLE  PD  DELETE  1.1 TITLE  NAME  THOMPSON, LUCIOUS W.  12. NAME  STREET ADDRESS  CITY-ST-ZIP  ORANGE PARK FL 32073  1.4 CITY-ST-ZIP  THOMPSON, ESSIE LEE  2.2 NAME  STREET ADDRESS  CITY-ST-ZIP  ORANGE PARK FL 32073  DELETE  2.3 STREET ADDRESS  CITY-ST-ZIP  ORANGE PARK FL 32073  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE	nt for the purpose reby accept the a	of changing i	ts registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I he agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE    Signature, typed or printed neme of registered agent and title II applicable. (NOTE: Registered Agent alignature required when reinstating)  12.	reby accept the a		
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 tille II applicable (NOTE: Registered Agent algnature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES  TITLE  PD  THOMPSON, LUCIOUS W. 12. NAME  STREET ADDRESS  DITY-ST-ZIP  ORANGE PARK FL 32073  1.4 CITY-ST-ZIP  TITLE  PD  DELETE  2.1 TITLE  PD  DELETE  2.2 NAME  STREET ADDRESS  CITY-ST-ZIP  THOMPSON, ESSIE LEE  STREET ADDRESS  CITY-ST-ZIP  ORANGE PARK FL 32073  DELETE  2.2 NAME  STREET ADDRESS  ORANGE PARK FL 32073  DELETE  3.1 TITLE		ppolitin torit do	
Signature. typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent alignature required when reinstating)  12. OFFICERS AND DIRECTORS  TITLE PD DELETE 1.1 TITLE NAME THOMPSON, LUCIOUS W. 12 NAME STREET ADDRESS 1907 MILLER ST 1.3 STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073 1.4 CITY-ST-ZIP TITLE PD DELETE 2.1 TITLE NAME THOMPSON, ESSIE LEE 2.2 NAME STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073 2.2 STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073 3.3 STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073 3.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE			. 58,515,54
TITLE PD DELETE 1.1 TITLE  NAME THOMPSON, LUCIOUS W. 1.3 STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073 1.4 CITY-ST-ZIP  NAME THOMPSON, ESSIE LEE 2.2 NAME STREET ADDRESS 1907 MILLER ST 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP  TITLE D DELETE 3.1 TITLE  D DELETE 3.1 TITLE			
DELETE	DATE TO DEFICERS A		RS IN 12
NAME	10 OFFICERS A	☐ Change	Addition
### STREET ADDRESS   1907 MILLER ST   1.8 STREET ADDRESS			
ORANGE PARK FL 32073   1.4 CITY-ST-ZIP			
TITLE			
NAME         THOMPSON, ESSIE LEE         2.2 NAME           STREET ADDRESS         1907 MILLER ST         2.3 STREET ADDRESS           CITY-ST-ZIP         ORANGE PARK FL 32073         2.4 CITY-ST-ZIP           TITLE         D         DELETE         3.1 THLE		Change	☐ Addition
STREET ADDRESS CHY-ST-ZIP ORANGE PARK FL 32073 11TLE D 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 THLE		,	
TITLE D DELETE 3.1 THLE	* * ***		
TITLE D DELETE 3.1 THLE			
DOREDTS LADDY VERNON		Change	Addition
STREET ADDRESS 2535 JAMMES ROAD, APT. #46 3.3 STREET ADDRESS			
CITY-ST-ZIP JAKCONSILLVE FL 32210 3.4.CITY-ST-ZIP			
TITLE \$ DELETE 4.1 TITLE		Change	Addition
NAME RICKS, ANNETTE E 4.2 NAME			
STREET ADDRESS 1851 YUKON CT 43 STREET ADDRESS			
CITY-ST-ZIP MIDDLEBURG FL 32068 44-CITY-ST-ZIP			1 4 4 100
TITLE DELETE 5.1 TITLE		Change	Addition
NAME 52 NAME			
STREET ADDRESS 53 STREET ADDRESS			
CITY-ST-ZIP		Change	g.dabir-
		Change	☐ Addition
NAME 6.2 NAME			
STREET ADDRESS 6.3 STREET ADDRES			
CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal			

officer or director of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter of the corporation or the receiver or trustee empowered to execute this report as required by chapter or trustee empowered to execute this report as required by chapter or trustee empowered to execute this report as required by chapter or trustee empowered to execute this report as required by chapter or trustee empowered to execute this report as required by chapter or trustee empowered to execute the chapter of the corporation of the cor