

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767291

FILED
Apr 13, 2011
Secretary of State

Entity Name: NEW HOPE UNIVERSAE HOLINESS CHURCH #2, INCORPORATION

Current Principal Place of Business:

115 WOODLAWN AVE.
ST. AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

699 CHRISTOPHER STREET.
ST. AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUL, WILLIE PD
699 CHRISTOPHER STREET
ST. AUGUSTINE, FL 32084 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: PD
Name: SAUL, WILLIE
Address: 699 CHRISTOPHER STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D
Name: SAUL, WILLIE
Address: 699 CHRISTOPHER STREET
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: SD
Name: GARDEN, ENDOLYN
Address: 9645 OLD BAYMEADOWS ROAD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: D
Name: CAMPBELL, PRICELLA
Address: 11 WASHINGTON STRET
City-St-Zip: PALATKA, FL 32177 US

Title: D
Name: HACKNEY, ELOUIS
Address: 818 N 11TH STREET
City-St-Zip: PALATKA, FL 32177 US

Title: D
Name: SAUL, LUNETTA
Address: 699 CHRISTOPHER STRET
City-St-Zip: ST AUGUSTINE, FL 32084 US

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: WILLIE SAUL

PD

04/13/2011

Electronic Signature of Signing Officer or Director

Date