

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770480

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: NEW HOPEWELL FAMILY WORSHIP CENTER, INC.

**Current Principal Place of Business:**

3101  
MIAMI, FL 33142 US

**New Principal Place of Business:**

**Current Mailing Address:**

8043 NW 14TH AVE.  
MIAMI, FL 33147 US

**New Mailing Address:**

FEI Number: 59-2345606      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DAVIS, REV. GEORGE ROBERT  
8043 NW 14TH AVE.  
MIAMI, FL 33147 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 ( ) Delete  
Name: DAVIS, REV. GEORGE R, .  
Address: 8043 NW 14 AVE.  
City-St-Zip: MIAMI, FL

Title: VD ( ) Delete  
Name: DAVIS, NETTIE,  
Address: 8043 NW 14 AVE.  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: MAJOR, JOHN,  
Address: 17530 NW 27TH COURT  
City-St-Zip: MIAMI, FL

Title: S ( ) Delete  
Name: GAMBLE, PARQUITTA,  
Address: 1340 NW 176 TERRACE  
City-St-Zip: MIAMI, FL

**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:

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: REV. GEORGE R. DAVIS

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04/24/2006

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

\_\_\_\_\_  
Date