

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00279

FILED
Mar 13, 2009
Secretary of State

Entity Name: HOPE CHAPEL MINISTRIES/WOMEN'S CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

2510 WALDEMAR LANE
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

33164 FOREST AVENUE
WAYNE, MI 48184 US

New Mailing Address:

FEI Number: 59-2439897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASHOURI, JOARVONIA
2510 WALDEMAR LANE
TALLAHASSEE, FL 32304 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: LASTER, GERRIE D.,
Address: 33164 FOREST AVENUE
City-St-Zip: WAYNE, MI 48184

Title: DS () Delete
Name: WOODBURY, POWELL JR.
Address: 4023 RIVER MEDE DR SW
City-St-Zip: ATLANTA, GA 30047

Title: DVP () Delete
Name: LASTER, ISIAH
Address: 33164 FOREST AVENUE
City-St-Zip: WAYNE, MI 48184 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: WOODBURY, POWELL JR.
Address: 4023 RIVER MEDE DR SW
City-St-Zip: LILBURN, GA 30047

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: GERRIE LASTER

PD

03/13/2009

Electronic Signature of Signing Officer or Director

Date