

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 23, 2004
Secretary of State**

DOCUMENT# N04000000123

Entity Name: NEW HOPE MINISTRIES OF LAUREL HILL, INC.

Current Principal Place of Business:

3761 NEW EBENEZER ROAD
LAUREL HILL, FL 32567

New Principal Place of Business:

Current Mailing Address:

3761 NEW EBENEZER ROAD
LAUREL HILL, FL 32567

New Mailing Address:

FEI Number: 20-1028110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, WILLIE E JR
3761 NEW EBENEZER ROAD
LAUREL HILL, FL 32567

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: WILLIAMS, WILLIE E JR
Address: P.O. BOX 83
City-St-Zip: LAUREL HILL, FL 32567

Title: D () Delete
Name: HINES, TYRONE
Address: 2980 WINDSOR CIRCLE
City-St-Zip: CRESTVIEW, FL 32539

Title: D () Delete
Name: GANTT, MARY LOU
Address: P.O. BOX 27
City-St-Zip: LAUREL HILL, FL 32567

Title: D () Delete
Name: BRINSON, ARTHUR
Address: 2833 PENNY LANE
City-St-Zip: CRESTVIEW, FL 32539

Title: D () Delete
Name: BROWN, LINDA
Address: 241 WEDGEWOOD LANE
City-St-Zip: CRESTVIEW, FL 32536

Title: D () Delete
Name: WILLIAMS, SONYA
Address: P.O. BOX 83
City-St-Zip: LAUREL HILL, FL 32567

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: D (X) Change () Addition
Name: BROWNE, LINDA
Address: 241 WEDGEWOOD LANE
City-St-Zip: CRESTVIEW, FL 32536

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 Section 119.07(3)(i), 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: LINDA J. BROWNE

D

08/23/2004

Electronic Signature of Signing Officer or Director

Date