

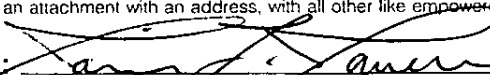
2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90025 027 ****61.25

DOCUMENT # N04000010598 1. Entity Name HOPE UNITED CHURCH (PCUSA), INC.					
Principal Place of Business 7470 HICKORY ROAD FT. MYERS FL 33912			Mailing Address 7470 HICKORY ROAD FT. MYERS FL 33912		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
MARRS, SAM 9880 TREASURE CAY LANE BONITA SPRINGS FL 34135				Name Knapp, John Street Address (P.O. Box Number is Not Acceptable) 19409 Silver Oaks Dr. City Ft. Myers FL Zip Code 33912	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable				DATE 01/30/06 (NOTE: Registered Agent signature required when reissuing)	
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	NAME	☐ Delete	TITLE	☐ Change ☐ Addition	
STREET ADDRESS	WEINZETTLE, JOHN 6723 SEA ISLKE DR. FORT MYERS FL 33908-6100		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change ☐ Addition	
STREET ADDRESS	GATES, GEORGIA W 20131 COBBLESTONE COURT ESTERO FL 33928		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change ☐ Addition	
STREET ADDRESS	JAMESON, JAMIE 3192 BRAMBLE COURT FT. MYERS FL 33905		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change ☐ Addition	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	☐ Delete	TITLE	☐ Change ☐ Addition	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  - JAMIE F. JAMESON, 2606