

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48375

FILED  
Apr 17, 2012  
Secretary of State

**Entity Name:** NEW HOPE HOLINESS CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

813 MARION STREET  
BUNNELL, FL 32110 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2292  
BUNNELL, FL 32110

**New Mailing Address:**

12 BRIDGEHAVEN DRIVE  
PALM COAST, FL 32137

**FEI Number:** 59-3122309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MITCHELL, PAULINE  
12 BRIDGEHAVEN DRIVE  
PALM COAST, FL 32137 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:** PDS  
**Name:** MITCHELL, PAULINE  
**Address:** 12 BRIDGEHAVEN DR  
**City-St-Zip:** PALM COAST, FL 32137

**Title:** V  
**Name:** MITCHELL, RANDALL  
**Address:** 12 BRIDGEHAVEN DR  
**City-St-Zip:** PALM COAST, FL 32137

**Title:** D  
**Name:** MITCHELL, SHARON L  
**Address:** MADISON GREEN APT.1410  
**City-St-Zip:** PALM COAST, FL 32164

**Title:** TD  
**Name:** BROWN, BETTY  
**Address:** P.O. BOX 54, 212 MOORE STRET  
**City-St-Zip:** BUNNELL, FL 32410

**Title:** SD  
**Name:** FLYNT, PAULINE  
**Address:** 1005 CONTINENTAL DR  
**City-St-Zip:** DAYTONA BEACH, FL 32117

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:** PAULINE MITCHELL

PDS

04/17/2012

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

\_\_\_\_\_  
Date