2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000990

Entity Name: NEW HOPE WORLD OUTREACH, INC.

FILED Jun 10, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
21113 JOHNSON ST. 101 PEMBROKE PINES, FL 33029		540 NE 8TH STREET FT LAUDERDALE, FL 33304	
Current Mailing Address:		New Mailing Address:	
	8TH AVENUE E PINES, FL 33028		
	65-0901494 FEI Number Applied For() FEI Nue with s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:	-	
890 NW 16	EBRA A DR 8TH AVENUE E PINES, FL 33028 US		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing it	s registered office or registered agent, or both,
SIGNATUR	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS	AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () Delete ALLEN, DEBRA 890 NW 168 AVE. PEMBROKE PINES, FL 33028	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete BRANCH, ELECTA 3345 N. STATE HWY 239 BLYTHEVILLE, AR 72315	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WARREN, WOODARD 1821 NW 36 TERRACE FT LAUDERDALE, FL 33311
Title: Name: Address: City-St-Zip:	D () Delete BRASSFIELD, PHILLIP DR P.O. BOX 341 HEBER SPRINGS, AR 72543	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete GOLPHIN, RAYMOND 1105 TERRY LANE BLYTHEVILLE, AR 72315	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete DESNOYERS- COLAS, ELIZABETH DR 538 PHEASANT RUN VIRGINIA BEACH, VA 23452	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DESNOYERS- COLAS, ELIZABETH DR 11935 ABERCOM STREET SAVANNAH, GA 31419
Title: Name: Address: City-St-Zip:	D () Delete GIBSON, ELIZABETH 158521 SW 3RD CT 9-201 PEMBROKE PINES, FL 33027	Title: Name: Address: City-St-Zip:	D (X) Change () Addition GIBSON, ELIZABETH 890 NW 168TH AVE PEMBROKE PINES, FL 33028

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: DEBRA A ALLEN PD 06/10/2008