2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002487

FILED May 01, 2007 Secretary of State

Entity Name: LIGHT OF HOPE TABERNACLE, INC.

urrent F	Principal Place of Business:	New Principal Pla	ace of Business:
	RENE MEADOW DR. N ATON, FL 33428		
urrent N	Mailing Address:	New Mailing Add	ress:
	FICE BOX 1952 ATON, FL 33429		
	r: FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did n d Address of Current Registered Agent:		Certificate of Status Desired ()
43 ALME	& UTRERA, P.A. ERIA AVENUE GABLES, FL 33134 US		
	e named entity submits this statement for the te of Florida.	purpose of changing its regist	tered office or registered agent, or bo
IGNATU	IRE:		
IGNATU	RE: Electronic Signature of Registered Ag	ent	Date
IGNATU			Date NGES TO OFFICERS AND DIRECT
FFICER tle: ame: ddress:	Electronic Signature of Registered Ages AND DIRECTORS: P () Delete CALICE, JEAN L 10157 SERENE MEADOW DR. N		
tle: ame: ddress: ity-St-Zip: tle: ame: ddress:	Electronic Signature of Registered Ages AND DIRECTORS: P () Delete CALICE, JEAN L 10157 SERENE MEADOW DR. N BOCA RATON, FL 33428 SD () Delete DORY, NADINE 10157 SERENE MEADOW DR. N	ADDITIONS/CHA Title: Name: Address:	NGES TO OFFICERS AND DIRECT
	Electronic Signature of Registered Ages AND DIRECTORS: P () Delete CALICE, JEAN L 10157 SERENE MEADOW DR. N BOCA RATON, FL 33428 SD () Delete DORY, NADINE 10157 SERENE MEADOW DR. N BOCA RATON, FL 33428 TD () Delete CALICE, MARIE S 10157 SERENE MEADOW DR. N	ADDITIONS/CHA Title: Name: Address: City-St-Zip: Title: Name: Address:	NGES TO OFFICERS AND DIRECT () Change () Addition
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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: JEUNE PIERRE D 05/01/2007