2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767291

Entity Name: NEW HOPE UNIVERSAE HOLINESS CHURCH #2,

INCORPORATION

Current Principal Place of Business:

115 WOODLAWN AVE. ST. AUGUSTINE, FL 32084

Current Mailing Address:

692 CHRISTOPHER STREET. ST. AUGUSTINE, FL 32084 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

SAUL, WILLIE PD 692 CHRISTOPHER STREET ST. AUGUSTINE, FL 32084 US

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

FILED Apr 09, 2013

Secretary of State

CC1960813679

Certificate of Status Desired: No

Officer/Director Detail:

Title PD Title D

Name SAUL, WILLIE Name SAUL, WILLIE

Address 699 CHRISTOPHER STREET Address 692 CHRISTOPHER STREET

City-State-Zip: SAINT AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32084

Title SD Title D

NameGARDEN, ENDOLYNNameCAMPBELL, PRICELLAAddress9645 OLD BAYMEADOWS ROADAddress11 WASHINGTON STRETCity-State-Zip:JACKSONVILLE FL 32256City-State-Zip:PALATKA FL 32177

Title D Title D

Name WARREN, BEVERLY Name SAUL, LUNETTA

Address 692 CHRISTOPHER STREET. Address 699 CHRISTOPHER STREET

City-State-Zip: ST. AUGUSTINE FL 32084

City-State-Zip: ST AUGUSTINE FL 32084

TitleDIRECTORTitleDIRECTORNameBROWN, PAMELANameWARREN, ERICA

Address 692 CHRISTOPHER STREET. Address 692 CHRISTOPHER STREET.

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32084

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: WILLIE SAUL PRESIDENT 04/09/2013

Electronic Signature of Signing Officer/Director Detail

Date