## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#710239**

FILED Jan 10, 2006 Secretary of State

Entity Name: NEW HOPE CHURCH OF MELBOURNE INC

Current Principal Place of Business: New Principal Place of Business:

2676 POST ROAD MELBOURNE, FL 32935

Current Mailing Address: New Mailing Address:

2676 POST ROAD MELBOURNE, FL 32935

FEI Number: 59-1773146 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PLATT, BEATRICE CADLE, PASTOR BRUCE 2676 POST RD 2676 POST RD

MELBOURNE, FL 32935 US MELBOURNE, FL 32935 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: PASTOR BRUCE CADLE 01/10/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT ( ) Delete Title: PT (X) Change ( ) Addition Name: PLATT, BEATRICE Name: VANDEBERG, ANDREA

Name:PLATT, BEATRICEName:VANDEBERG, ANDREAAddress:4905 W EDU GALLIE BLVDAddress:164 SAN JUAN CIRCLECity-St-Zip:MELBOURNE, FL 32934City-St-Zip:MELBOURNE, FL 32935

Title: ST () Delete Title: ST (X) Change () Addition Name: VANDEBERG, ANDREA Name: STEINLEITNER, DAVID

Address: 164 SAN JUAN CIR Address: 4520 RIVERMIST DRIVE
City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935

Title: T () Delete Title: VPT (X) Change () Addition

 Name:
 VANDEBERG, ERNEST
 Name:
 BOSTWICK, DARRELL

 Address:
 2559 LOCKSLEY RD
 Address:
 3218 ALABAMA ST

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:
 MELBOURNE, FL 32901

Title: VPT (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BOSTWICK, DARRELL
 Name:

 Address:
 3218 ALABAMA ST
 Address:

 City-St-Zip:
 MELBOURNE, FL 32901
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PASTOR BRUCE CADLE RA 01/10/2006