2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:>

FILED Mar 22, 2006 08:00 A Secretary of State **DOCUMENT # 728313** 1. Entity Name NEW HOPE MISSIONARY BAPTIST CHURCH OF RIVIERA BEACH, INC. Principal Place of Business Mailing Address 1136 W 10TH ST 1641 WEST 13TH STREET RIVIERA BEHAC FL 33404 RIVIERA BEACH FL 33404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State 4. FEI Number City & State 59-6604853 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCKELVY, EDDIE Street Address (P.O. Box Number is Not Acceptable) **1641 W 13TH STREET** RIVIERA BEACH FL 33404 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signal-are required when reinstating) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete Addition TILE THIF 11000000477658 MCKELVY, EDDIE NAME MAME 04/06/06-80060-002 61.25 1641 W. 13TH STREET STREET ADDRESS STREET ADDRESS RIVIERA BEACH FL 33404 CHTY-ST-ZIP CULY-ST-7/P Addition ☐ Change ☐ Delete THILE TITLE BUSSEY, HARVIS NAME NAME STREET ADDRESS 1101 WEST 3RD ST STREET ADDRESS RIVIERA BEACH FL 33404 CISY-ST-ZIP CITY - ST - ZIP Addition ☐ Delete Change TITLE TITLE NAME JACKSON, WILLIE F 734 DATE PALM DR STREET ADDRESS STREET ADDRESS CITY ST-78 CHTY - ST - 719 LAKE PARK FL Change ☐ Addition ☐ Defete TITLE TITLE AGNEW, WILLIE MAE NAME MANUE STREET ADDRESS 1501 W 11TH STREET STREET ADDRESS CITY-SI-2IP RIVIERA BEACH FL 33404 CHY-ST-ZIP ☐ Change Addition ☐ Delete TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C17Y - ST- 21P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.