

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735485

FILED  
Jul 10, 2006  
Secretary of State

Entity Name: HOPE BAPTIST CHURCH, INC.

## Current Principal Place of Business:

826 REYNOLDS LANE  
JACKSONVILLE, FL 32254 US

## New Principal Place of Business:

## Current Mailing Address:

826 REYNOLDS LANE  
JACKSONVILLE, FL 32254 US

## New Mailing Address:

FEI Number: 59-1439247      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

ALAN, ANDREWS  
6059 TRIUMPH LANE W  
JACKSONVILLE, FL 32244 US

## Name and Address of New Registered Agent:

SUBER, DALE  
673 CAMP MILTON LANE  
JACKSONVILLE, FL 32220 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: DALE SUBER

07/10/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: DYER, DARLENE G  
Address: 12209 WINSTEAD ROAD  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: D ( ) Delete  
Name: SUBER, DALE  
Address: 673 CAMP MILTON LANE  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: D ( ) Delete  
Name: MCANALLEN, TIM  
Address: 44078 MEADOW BLESSING LANE  
City-St-Zip: CALLAHAN, FL 32011 US

Title: M (X) Delete  
Name: POWERS, JOHN  
Address: 1051 MANTES AVENUE  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: M (X) Delete  
Name: SCOATES, STEVE  
Address: 6059 TRIUMPH LANE W  
City-St-Zip: JACKSONVILLE, FL 32244 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: DYER, DARLENE G  
Address: 45105 MICKLER STREET  
City-St-Zip: CALLAHAN, FL 32011 US

Title: D (X) Change ( ) Addition  
Name: MCANALLEN, TOM  
Address: 44078 MEADOW BLESSING LANE  
City-St-Zip: CALLAHAN, FL 32011 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: DARLENE DYER

T

07/10/2006

Electronic Signature of Signing Officer or Director

Date