

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736884

FILED  
Jan 12, 2012  
Secretary of State

**Entity Name:** HOPE OF SHILOH COMMUNITY CHURCH, INC.

**Current Principal Place of Business:**

3910 E CONOVER STREET  
TAMPA, FL 33610 US

**New Principal Place of Business:**

**Current Mailing Address:**

3910 E CONOVER STREET  
TAMPA, FL 33610 US

**New Mailing Address:**

FEI Number: 59-3397547

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AUSTIN, DOYLE L  
4213 E ELLICOTT STREET  
TAMPA, FL 33610 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BENN, ROBERT ELDER  
Address: 1045 STANDING REED PL  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: C/T  
Name: AUSTIN, DOYLE  
Address: 4213 E. ELLICOTT ST.  
City-St-Zip: TAMPA, FL 33610

Title: C/T  
Name: COPELAND, CHESTER  
Address: 10461 BLOOMFIELD HILLS DRIVE  
City-St-Zip: SEFFNER, FL 33584 US

Title: TT  
Name: JORDAN, VERLION H  
Address: 5108 19TH STREET  
City-St-Zip: TAMPA, FL 33610

Title: T  
Name: WISE, JOHN SR.  
Address: 4018 W. FIG STREET  
City-St-Zip: TAMPA, FL 33609

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: ELDER ROBERT BENN

P

01/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date