

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 05, 2005**  
**Secretary of State**

DOCUMENT# 745070

Entity Name: NEW HOPE INC. IN SOUTHWEST RANCHES

**Current Principal Place of Business:**

13400 GRIFFIN RD  
SOUTHWEST RANCHES, FL 33330 US

**New Principal Place of Business:**

**Current Mailing Address:**

13400 GRIFFIN RD  
SOUTHWEST RANCHES, FL 33330 US

**New Mailing Address:**

FEI Number: 59-1843522      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LIVELY, DAVID R  
6271 GAUNTLET HALL LANE  
DAVIE, FL 33331 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: STD ( ) Delete  
Name: WALKER, GORDON  
Address: 5424 NW 190 ST  
City-St-Zip: MIAMI, FL

Title: ST ( ) Delete  
Name: WALKER, GORDON  
Address: 5424 NW 190 STREET  
City-St-Zip: MIAMI, FL

Title: RA ( ) Delete  
Name: LIVELY, DAVID R  
Address: 6271 GAUNTLET HALL LANE  
City-St-Zip: DAVIE, FL 33331

Title: D ( ) Delete  
Name: MOSS JR, LEDLY  
Address: 7010 NW 186 ST  
City-St-Zip: MIAMI, FL 33015

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 Section 119.07(3)(i), 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: DAVID R .LIVELY

RA

01/05/2005

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

\_\_\_\_\_  
Date