


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mertham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 749333 (1)
 1. Corporation Name
NEW HOPE TABERNACLE OF MANATEE COUNTY, INC.

Principal Place of Business Mailing Address
928 63RD AVENUE EAST **928 63RD AVENUE EAST**
BRADENTON FL 34203-7728 **BRADENTON FL 34203-7728**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/16/1979	3a. Date of Last Report 05/01/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1806597	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, RICHARD
5105 19TH ST. W.
BRADENTON FL 34207

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD V.D. <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, RICHARD	1.2 NAME	
STREET ADDRESS	5105 19TH ST. W.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34207	1.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALDERMAN, JAMES	2.2 NAME	Richard F. McWhorter
STREET ADDRESS	3308 ELM ST.	2.3 STREET ADDRESS	928 63rd Ave. E.
CITY-ST-ZIP	ELLENTON FL 34222	2.4 CITY-ST-ZIP	Bradenton, FL 34203
TITLE	TD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PORTER, MELODY	3.2 NAME	Amelia Sell
STREET ADDRESS	1193 DANNY DRIVE	3.3 STREET ADDRESS	1918 49th St. E.
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	Palmetto, FL 34221
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Richard F. McWhorter
STREET ADDRESS		4.3 STREET ADDRESS	928 63rd Ave. E.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Bradenton, FL 34203
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Amelia Sell
STREET ADDRESS		5.3 STREET ADDRESS	1918 49th St. E.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Palmetto, FL 34221
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard F. McWhorter* *Richard F. McWhorter* **2-4-97** **941-755-7949**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0081402

CR2E037 (9/96)