


FILE NOW: FILING FEE IS \$61.25

FILED

Mar 11 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 749962 (7)**  
1. Corporation Name  
**NEW HOPE CHRISTIAN MINISTRIES, INC.**



Principal Place of Business <b>1187 SULTANA ST P.O. BOX 3756 PORT CHARLOTTE FL 33949</b>	Mailing Address <b>1187 SULTANA ST P.O. BOX 3756 PORT CHARLOTTE FL 33949</b>
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3. Date Incorporated or Qualified <b>11/29/1979</b>		
4. FEI Number <b>59-1962384</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent <b>DAL PIAN, STEPHEN R 1187 SULTANA ST PORT CHARLOTTE FL 33952</b>		81 Name
		82 Street Address (P.O. Box Number is Not Acceptable)
		83
		84 City
		85 Zip Code

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DAL PIAN, STEPHEN	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1187 SULTANA ST	1.2 NAME	
STREET ADDRESS	PT. CHARLOTTE FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D ALLEN, DARWIN REV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3828 LINDSLEY DR	2.2 NAME	
STREET ADDRESS	METAMORA MI	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VD SPARROW, COLEMAN REV	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	114 S E SINCLAIR ST	3.2 NAME	
STREET ADDRESS	PT CHARLOTTE, FL 00000	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D BURNS, SAM	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	106 MEEHAN AVE NE	4.2 NAME	
STREET ADDRESS	PT CHARLOTTE FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	SD DAL PIAN, NANCY L	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1187 SULTANA ST	5.2 NAME	
STREET ADDRESS	PT CHARLOTTE FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	T REUTER, CHERYL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	23331 LEHIGH AVE	6.2 NAME	
STREET ADDRESS	PT CHARLOTTE FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: *Stephen R. Dal Pian* STEPHEN R. DAL PIAN 3/5/98 941-625-9510

CFR2037 (10/97)