

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749962

FILED  
Jun 01, 2005  
Secretary of State

Entity Name: NEW HOPE CHRISTIAN MINISTRIES, INC.

**Current Principal Place of Business:**

1187 SULTANA ST  
P.O. BOX 495805  
PORT CHARLOTTE, FL 33949 US

**New Principal Place of Business:**

**Current Mailing Address:**

1187 SULTANA ST  
P.O. BOX 495805  
PORT CHARLOTTE, FL 33949 US

**New Mailing Address:**

FEI Number: 59-1962384      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:**

DAL PIAN, STEPHEN R  
1187 SULTANA ST  
PORT CHARLOTTE, FL 33952 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: PD ( ) Delete  
Name: DAL PIAN, STEPHEN,  
Address: 1187 SULTANA ST  
City-St-Zip: PT. CHARLOTTE, FL 33952 US

Title: D ( ) Delete  
Name: ALLEN, DARWIN REV,  
Address: 3800 MELS ROAD  
City-St-Zip: METAMORA, MI 48455 US

Title: D ( ) Delete  
Name: WILLIAMS, WAYNE  
Address: 1321 KENMORE ST  
City-St-Zip: PT CHARLOTTE, FL 33952 US

Title: D ( ) Delete  
Name: BURNS, SAM,  
Address: 106 MEEHAN AVE NE  
City-St-Zip: PT CHARLOTTE, FL 33952 US

Title: SD ( ) Delete  
Name: DAL PIAN, NANCY L,  
Address: 1187 SULTANA ST  
City-St-Zip: PT CHARLOTTE, FL 33952 US

Title: T ( ) Delete  
Name: REUTER, CHERYL,  
Address: 23331 LEHIGH AVE  
City-St-Zip: PT CHARLOTTE, FL 33952 US

**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:

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: STEPHEN R. DAL PIAN

PRES

06/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date