# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 02, 2007**
**Secretary of State**

DOCUMENT# 749962

**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:**

1187 SULTANA ST
NONE
PORT CHARLOTTE, FL 33952 US

**Current Mailing Address:**

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

**New Mailing Address:**

1187 SULTANA ST
NONE
PORT CHARLOTTE, FL 33952 US

**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 exemption stated in Chapter 119, 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 07/02/2007
Electronic Signature of Signing Officer or Director — Date