

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 752462

FILED  
Mar 15, 2002 8:00 AM  
Secretary of State

Entity Name: NEW HOPE APOSTOLIC CHURCH INCORPORATED

## Current Principal Place of Business:

3012 N. 22ND STREET  
TAMPA, FL 33605

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 291332  
TAMPA, FL 33687

## New Mailing Address:

P.O. BOX 5496  
TAMPA, FL 33675

FEI Number: 05-0304000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ANDERSON, JAMES  
3012 N 22ND ST  
TAMPA, FL 33605 US

## Name and Address of New Registered Agent:

ANDERSON, JAMES W PASTOR  
3012 N 22ND ST  
TAMPA, FL 33605 US

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: JAMES W. ANDERSON

03/15/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ANDERSON, JAMES,  
Address: 3012 N 22ND ST  
City-St-Zip: TAMPA, FL

Title: D ( ) Delete  
Name: STEWART, CARLA  
Address: 2613 E 9TH AVENUE  
City-St-Zip: TAMPA, FL

Title: D ( ) Delete  
Name: MINGO, SHIRLEY  
Address: 1905 E CLINTON STREET  
City-St-Zip: TAMPA, FL 33610

Title: SD ( ) Delete  
Name: HANCOCK, DONNA,  
Address: 1442 139TH AVE E  
City-St-Zip: TAMPA, FL 33613

Title: D ( ) Delete  
Name: WELCH, CAROLYN  
Address: 1701 PINE STREET  
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete  
Name: ANDERSON, GREGORY L  
Address: 669 LAKEMONT DRIVE  
City-St-Zip: BRANDON, FL 33510

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ANDERSON, JAMES,  
Address: 3012 N 22ND ST  
City-St-Zip: TAMPA, FL 33605 US

Title: D (X) Change ( ) Addition  
Name: STEWART, CARLA  
Address: 12509 TINSLEY CIRCLE #204  
City-St-Zip: TAMPA, FL 33612

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

Title: SD (X) Change ( ) Addition  
Name: HANCOCK, DONNA,  
Address: P.O. BOX 172933  
City-St-Zip: TAMPA, FL 33672

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: JAMES W. ANDERSON

P

03/15/2002

Electronic Signature of Signing Officer or Director

Date

TIGER NEWKIRT/DIRECTOR  
15420 LIVINGSTON AVENUE APT#1113  
LUTZ, FL. 33559