

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753512

FILED  
May 10, 2009  
Secretary of State

**Entity Name:** NEW HOPE MISSIONARY BAPTIST CHURCH OF APOPKA, INC.

**Current Principal Place of Business:**

927 SOUTH CENTRAL AVE  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

927 SOUTH CENTRAL AVE  
APOPKA, FL 32703

**New Mailing Address:**

**FEI Number:**  **FEI Number Applied For (X)**  **FEI Number Not Applicable ( )**  **Certificate of Status Desired (X)**   
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:**

SMITH, ALEXANDER H  
569 STRATHCLYDE COURT  
APOPKA, FL 32712 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: DERICHO, H L  
Address: 4856 PAT ANN TERR  
City-St-Zip: ORLANDO, FL 32808

Title: VD ( ) Delete  
Name: DOWDELL, LAFYAETTE  
Address: 31115 WESTCHESTER DR  
City-St-Zip: MT PLYMOUTH, FL 32776

Title: CT ( ) Delete  
Name: SMITH, ALEXANDER H  
Address: 569 STRATHCLYDE CT  
City-St-Zip: APOPKA, FL 32712

Title: ST ( ) Delete  
Name: MCCRAY, MARTHA  
Address: 185 WEST 7TH STREET  
City-St-Zip: APOPKA, FL 32703

Title: T ( ) Delete  
Name: MCKENZIE, CLIFFORD  
Address: ELLA J. GILMORE ST  
City-St-Zip: APOPKA, FL 32703

**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:

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: ALEXANDER H. SMITH

CT

05/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date