

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90031 003 ****61.25

DOCUMENT # N00000005060
 1. Entity Name
NEW HOPE COMMUNITY OF PINELLAS, INC.



Principal Place of Business Mailing Address
2636 BAYSHORE BLVD. **2636 BAYSHORE BLVD.**
DUNEDIN, FL 34698 **DUNEDIN, FL 34698**

50007798

DO NOT WRITE IN THIS SPACE

01192005 No Chg-NP CR2E037 (10/03)

4. FEI Number **59-3662320** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
KALIL, RICHARD C
1412 QUAIL DRIVE
DUNEDIN, FL 34698

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	KALIL, RICHARD
STREET ADDRESS	1412 QUAIL DRIVE
CITY-ST-ZIP	PALM HARBOR, FL 34683 <i>Dunedin, FL 34698</i>
TITLE	T
NAME	WOLLETT, FRANKLYN
STREET ADDRESS	1960 DUNBRODY CT
CITY-ST-ZIP	DUNEDIN, FL 34698
TITLE	T
NAME	GOSNELL, DAVID
STREET ADDRESS	1972 DUNLOE CIRCLE
CITY-ST-ZIP	DUDEDIN, FL 34689
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard C. Kalil* *Richard C. Kalil* *1/24/2005* *727 409-7221*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #