

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N00000005060**

1. Entity Name  
**NEW HOPE COMMUNITY OF PINELLAS, INC.**



Principal Place of Business <b>2636 BAYSHORE BLVD.          DUNEDIN, FL 34698</b>	Mailing Address <b>2636 BAYSHORE BLVD.          DUNEDIN, FL 34698</b>
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01112007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3662320</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**KALIL, RICHARD C  
 1412 QUAIL DRIVE  
 DUNEDIN, FL 34698**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
 Due by May 1, 2007**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KALIL, RICHARD 1412 QUAIL DRIVE DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WOLLETT, FRANKLYN 1960 DUNBRODY CT DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GOSNELL, DAVID 1972 DUNLOE CIRCLE DUDEDIN, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/24/07-80083-020 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 fees empowered.

**SIGNATURE:** *Richard Kalil* **RICHARD KALIL** 1-19-2007 727-409-7221  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #