

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00969

FILED
Mar 31, 2005
Secretary of State

Entity Name: GREATER NEW HOPE MISSIONARY BAPTIST CHURCH INC.

Current Principal Place of Business:

3099 ORANGE CENTER BLVD.
ORLANDO, FL 32805

New Principal Place of Business:

3032 MONTE CARLO TRAIL
ORLANDO, FL 32805

Current Mailing Address:

3099 ORANGE CENTER BLVD.
ORLANDO, FL 32805

New Mailing Address:

3032 MONTE CARLO TRAIL
ORLANDO, FL 32805

FEI Number: 59-2678885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIGGINS, R.W. REV.
3099 ORANGE CENTER BLVD.
ORLANDO, FL 32805 US

Name and Address of New Registered Agent:

WIGGINS, R.W. REV.
3032 MONTE CARLO TRAIL
ORLANDO, FL 32805 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: REV. R. W. WIGGINS

03/31/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WIGGINGS, RUSSEL W REV
Address: 829 FERGESON DR.
City-St-Zip: ORLANDO, FL 32808

Title: DS () Delete
Name: AXSON, YOLANDA
Address: 6541 HAWKSMORE DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: BANKS, EDDIE,
Address: 4301 CYNTHIA STREET
City-St-Zip: ORLANDO, FL

Title: T () Delete
Name: DAVIS, ELLA MAE,
Address: 2408 SPINGARN CT.
City-St-Zip: ORLANDO, FL 32811

Title: S () Delete
Name: HILL, ALICE,
Address: 4927 KINGCOLE BLVD.
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: WIGGINS, BEULAH
Address: 829 FERGUSON DR
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: WIGGINS, ALLEN T REV
Address: 3032 MONTE CARLO TRAIL
City-St-Zip: ORLANDO, FL 32805

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 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: ALLEN WIGGINS

PD

03/31/2005

Electronic Signature of Signing Officer or Director

Date