## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00969

FILED Apr 28, 2009 Secretary of State

Entity Name: GREATER NEW HOPE MISSIONARY BAPTIST CHURCH INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	TE CARLO TF ), FL 32805	RAIL			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	TE CARLO TF ), FL 32805	RAIL			
FEI Number:	59-2678885	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
	ALLEN T ITE CARLO T ), FL 32805	RAIL US			
	named entity of Florida.	submits this statement for the p	urpose of changing its register	ed office or registered agent, or both,	
SIGNATUF	RE:				
	Electror	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( WIGGINS, ALL 3032 MONTE O ORLANDO, FL	ARLO TRAIL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( BANKS, EDDIE 4301 CYNTHIA ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( DAVIS, ELLA M 2408 SPINGAR ORLANDO, FL	N CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ( HILL, ALICE 4927 KINGCOL ORLANDO, FL	Delete E BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( WIGGINS, BEU 829 FERGUSO ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MICHELLE GREENWOOD ADM 04/28/2009