2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2008
Secretary of State

DOCUMENT# N01000003951

Entity Name: ETERNAL HOPE RADIO BROADCASTING CORPORATION

Current Principal Place of Business:

1470 HUFFMAN RD.
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

P.O.BOX #1237
JENSEN BEACH, FL 34985 US

New Mailing Address:

FEI Number: 33-1018196 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

PEDZIWIATR, EDWARD
1861 NE ACAPULCO DRIVE
JENSEN BEACH, FL 34957 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: DPC ( ) Delete
Name: PEDZIWIATR, EDWARD
Address: 1861 NE ACAPULCO DR
City-St-Zip: JENSEN BCH, FL 34957

Title: DVC ( ) Delete
Name: SHERTZER, MARION
Address: 5640 SE MILES GRANT RD
City-St-Zip: STUART, FL 34997

Title: GD ( ) Delete
Name: RAYBURN, SAM
Address: 957 SW IDOL AVE
City-St-Zip: PORT ST LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TR (X) Change ( ) Addition
Name: SCALE, MARGUERITE A
Address: 957 SW IDOL AVE
City-St-Zip: PORT ST LUCIE, FL 34953

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: MARGUERITE SCALE MS 08/08/2008

Electronic Signature of Signing Officer or Director — Date