2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N01000004653

1. Entity Name

NEW HOPE CHURCH OF THE LIVING GOD INTERNATIONAL, INC.



FILED Feb 09, 2007 08:00 Al Secretary of State

Principal Place of Business

2525 AURORA ROAD #103 MELBOURNE, FL 32935 Mailing Address

2525 AURORA ROAD #103 MELBOURNE, FL 32935



01312007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-3740946

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHISOLM, CAROL 1457 COWART AVE MELBOURNE, FL 32935

SIGNATURE:

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			हैत के विश्व रिकारित विकास है।	
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				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan Trust Fund Contribution. -	cing \$5.00 May Be	
10.	OFFICERS AND DIRECTORS		TO BENEFIT FREE	1,001,100 (100,000)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELD CHISOLM, KIM CO-PAST 1457 COWART AVE MELBOURNE, FL 32935			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIND JONES, PRISCILLA MINISTE 550 CINNAMON DR SATELLITE BEACH, FL 32937			U00000630412 02/20/07-80006-012-70.00
TITLE NAME STREET ADDRESS CSTY-ST-ZIP	DBIS SMITH, CHARLES D BISHOP 1837 CROSSWINDS LANDING FWB, FL 32547		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAST CHISOLM, CAROL F ELDER 1457 COWART AVE MELBOURNE, FL 32935		N	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	:	str _e _e see .		
12. I hereby certify that the information supplied with this filling 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 like empowered.				