

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000030

FILED
Feb 28, 2005
Secretary of State

Entity Name: NEW HOPE IN CHRIST INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

C/O JONES,FOSTER,JOHNSTON & STUBBS, P.A.
505 S FLAGLER DR STE 1100
W PALM BCH, FL 33401

New Principal Place of Business:

Current Mailing Address:

C/O JONES,FOSTER,JOHNSTON & STUBBS, P.A.
505 S FLAGLER DR STE 1100
W PALM BCH, FL 33401

New Mailing Address:

FEI Number: 30-0032053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 S FLAGLER DR STE 1100
W PALM BCH, FL 33401 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: DP () Delete
Name: SOUZA, EDSON
Address: 3050 PRESIDENTIAL WAY #204
City-St-Zip: W PALM BCH, FL 33401

Title: DTS () Delete
Name: HARP, DONALD
Address: 3050 PRESIDENTIAL WAY #204
City-St-Zip: W PALM BCH, FL 33401

Title: D () Delete
Name: BRYAN, ROBERT DR
Address: CRICHTON COLLEGE 6655 WINDCHESTER RD
City-St-Zip: MEMPHIS, TN 38175

Title: D () Delete
Name: DICKERSON, TIMOTHY
Address: 1127 POINTE NEWPORT TERR APT 209
City-St-Zip: CASSELBERRY, FL 32707

Title: DV (X) Delete
Name: WHARTON, ROBERT
Address: 1633 TORRINGTON DR
City-St-Zip: MEMPHIS, TN 38018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: WALDO, DOUGLAS
Address: 1401 MANATEE AVE W, STE. 1100
City-St-Zip: BRADENTON, FL 34205

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: EDSON SOUZA

DP

02/28/2005

Electronic Signature of Signing Officer or Director

Date