

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000138

FILED  
Apr 23, 2007  
Secretary of State

**Entity Name:** NEW HOPE CHRISTIAN FELLOWSHIP AND FAMILY CENTER, INC.

**Current Principal Place of Business:**

370 ATWATER STREET  
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 380443  
PORT CHARLOTTE, FL 33948

**New Mailing Address:**

**FEI Number:** 80-0005368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILLER, ROGER H III,ESQ  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 US

**Name and Address of New Registered Agent:**

MILLER, ROGER H III  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 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: ROGER H. MILLER III

04/23/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D/P ( ) Delete  
Name: BLOOD, DAVID W REV  
Address: P.O. BOX 380443  
City-St-Zip: MURDOCK, FL 33938

Title: D/T ( ) Delete  
Name: DUNBAR, JAN  
Address: P.O. BOX 380443  
City-St-Zip: MURDOCK, FL 33938

Title: D/S ( ) Delete  
Name: SCHMELZER, KRISTINE  
Address: P.O. BOX 380443  
City-St-Zip: MURDOCK, FL 33938

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BLOOD, DAVID W REV  
Address: P.O. BOX 380443  
City-St-Zip: MURDOCK, FL 33938

Title: TD (X) Change ( ) Addition  
Name: DUNBAR, JAN  
Address: P.O. BOX 380443  
City-St-Zip: MURDOCK, FL 33938

Title: SD (X) Change ( ) Addition  
Name: SCHMELZER, KRISTINE  
Address: P.O. BOX 380443  
City-St-Zip: MURDOCK, FL 33938

I hereby certify that the information supplied with this filing does not qualify for the 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: REV. DAVID W. BLOOD

PD

04/23/2007

Electronic Signature of Signing Officer or Director

Date