

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000971

FILED
Jan 26, 2009
Secretary of State

Entity Name: CHRIST'S HOPE U.S.A., INC.

Current Principal Place of Business:

110 CEDAR POINT LANE
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 520328
LONGWOOD, FL 32752

New Mailing Address:

FEI Number: 11-3676998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UDVARI, GEORGE R
706 TURNBULL AVE.
#101
ALTAMONTE SPRINGS, FL 32701 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: D () Delete
Name: KASE, DAVID
Address: 5275 SWEET BREEZE LANE
City-St-Zip: TRAVERSE CITY, MI 49684

Title: D () Delete
Name: DIGGS, JOHN
Address: 2 BURNETT AVE
City-St-Zip: SOUTH HADLEY, MA 01075

Title: D () Delete
Name: WARD, ROBERT
Address: 58 OAK LANE
City-St-Zip: LAKE FOREST, IL 60045

Title: D () Delete
Name: MYERS, TOM
Address: 301 MARKHAM WOODS RD
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: ABT, EDWARD
Address: 110 CEDAR POINT LANE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TROTTER, TOM
Address: 17459 DRAYTON HALL WAY
City-St-Zip: SAN DIEGO, CA 92128 US

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

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

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 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: EDWARD ABT

D

01/26/2009

Electronic Signature of Signing Officer or Director

Date