2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N03000002293

Entity Name: CHURCH OF GOD CATHEDRAL OF HOPE, INC.

Current Principal Place of Business:

7600 WINEGARD ROAD
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

7600 WINEGARD ROAD
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3255114 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLON, NELSON F
1438 ROYAL SAINT GEORGE DR.
ORLANDO, FL 32828 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:	PD	( ) Delete
Name:	COLON, NELSON F	
Address:	1438 ROYAL SAINT GEORGE	
City-St-Zip:	ORLANDO, FL 32828	
Title:	D	( ) Delete
Name:	ALVAREZ, HIPOLITO TRUSTEE	
Address:	4330 WILLOWCREST CT.	
City-St-Zip:	ORLANDO, FL 32826	
Title:	D	( ) Delete
Name:	SAAEZ, JOSE TRUSTEE	
Address:	6061 A VILLAGE CIRCLE	
City-St-Zip:	ORLANDO, FL 32822	
Title:	D	( ) Delete
Name:	RIOS, ERIC	
Address:	3915 MONARCH DRIVE	
City-St-Zip:	ORLANDO, FL 32812	
Title:	D	( ) Delete
Name:	MARTINEZ, RUBEN JR	
Address:	2509 WAAKULLA WAY	
City-St-Zip:	ORLANDO, FL 32839	
Title:	T	( ) Delete
Name:	CLASS, MICHELLE	
Address:	12956 NEBRASKA WOODS CT	
City-St-Zip:	ORLANDO, FL 32824	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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: NELSON COLON PD 04/29/2009

Electronic Signature of Signing Officer or Director — Date