2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003464

FILED Apr 30, 2009 Secretary of State

Entity Nar	me: NEW HOPE	MINISTRIES OF ST CLOU	D CORP.		
Current Pi	rincipal Place of	Business:	New Principal Place	of Business:	
706 CYPRI ST CLOUE	ESS AVE), FL 34769				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
706 CYPRI ST CLOUE	ESS AVE), FL 34769				
FEI Number:	ı	FEI Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
706 CYPRI	AMES W JR ESS AVE), FL 34769 U	S			
	named entity sub of Florida.	omits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic	Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () De AVANT JAMES W . 706 CYPRESS AV ST. CLOUD, FL 34	JR. E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () De AVANT, WARREN P.O. BOX 700069 ST. CLOUD, FL 34		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () De PARRIS, CLE P.O. BOX 700069 ST. CLOUD, FL 34		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JAMES AVANT P 04/30/2009