## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003989

FILED Feb 02, 2006 Secretary of State

Entity Name: HOPEVILLE COMMUNITY DEVELOPMENT CORPORATION (CDC) OF PASCO AND HERNANDO

COUNTIES

Current Principal Place of Business: New Principal Place of Business:

14236 COUNTY LINE ROAD HUDSON, FL 34667

Current Mailing Address: New Mailing Address:

14236 COUNTY LINE ROAD HUDSON, FL 34667

FEI Number: 61-1444330 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HINSON, FREDDIE H REV. 14236 COUNTY LINE ROAD HUDSON, FL 34667 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HINSON, FREDDIE J REV
 Name:

 Address:
 14236 COUNTY LINE ROAD
 Address:

 City-St-Zip:
 HUDSON, FL 34667
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 FREEMAN, CHRISTOPHER
 Name:

 Address:
 8406 DELAWARE DR
 Address:

 City-St-Zip:
 SPRING HILL, FL 34607
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 HACKNEY, EVELYN
 Name:
 ROBBIN, RAWLINS

 Address:
 9048 HORIZON DR.
 Address:
 7388 HOLIDAY DR.

 City-St-Zip:
 SPRING HILL, FL 34608
 City-St-Zip:
 SPRING HILL, FL 34606

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BROWDY, RONALD
 Name:

 Address:
 12042 VILLA RD.
 Address:

 City-St-Zip:
 SPRING HILL, FL 34609
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 RAWLINS, ROBBIN
 Name:
 BRAGGS, WILLIAM

 Address:
 7388 HOLIDAY DR.
 Address:
 7301 OVERBIRD RD.

 City-St-Zip:
 SPRING HILL, FL 34606
 City-St-Zip:
 WEEKI WACHEE, FL 34613

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. FREDDIE HINSON JR. D 02/02/2006