

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005035

FILED
Mar 29, 2007
Secretary of State

Entity Name: COMMUNITY OF HOPE LUTHERAN CHURCH, INC.

Current Principal Place of Business:

8010 FRUITVILLE RD.
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

8010 FRUITVILLE RD.
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 56-2369520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUSTIN, ALLEN
8010 FRUITVILLE RD.
SARASOTA, FL 34240 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: VAUGHN, ROLLIE
Address: 5560 BEE RIDGE ROAD SUITE D-2
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: HOFFMEISTER, LAURA LEE
Address: 5560 BEE RIDGE ROAD SUITE D-2
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: AUSTIN, ALLEN
Address: 5560 BEE RIDGE ROAD SUITE D-2
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VAUGHN, ROLLIE
Address: 8010 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34240

Title: D (X) Change () Addition
Name: HOFFMEISTER, LAURA LEE
Address: 8010 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34240

Title: D (X) Change () Addition
Name: AUSTIN, ALLEN
Address: 8010 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34240

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: LAURA LEE HOFFMEISTER

D

03/29/2007

Electronic Signature of Signing Officer or Director

Date