# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 08, 2006**
**Secretary of State**

DOCUMENT# N04000003186

**Entity Name:** HOPE INTERNATIONAL CHRISTIAN MINISTRIES, INC.

**Current Principal Place of Business:**

8606 PURVIS ROAD
LITHIA, FL 335472600

**New Principal Place of Business:**

**Current Mailing Address:**

8606 PURVIS ROAD
LITHIA, FL 335472600

**New Mailing Address:**

**FEI Number: 20-1446136** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

STONEKING, GARY A
8606 PURVIS ROAD
LITHIA, FL 335472600 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: PMTR ( ) Delete
Name: STONEKING, GARY A
Address: 8606 PURVIS ROAD
City-St-Zip: LITHIA, FL 335472600

Title: VTR ( ) Delete
Name: PEARRE, LARRY B
Address: 2709 CHARLESTON DRIVE
City-St-Zip: PLANT CITY, FL 33563

Title: STR ( ) Delete
Name: PEARRE, PAMELA
Address: 2709 CHARLESTON DRIVE
City-St-Zip: PLANT CITY, FL 33563

Title: TRT ( ) Delete
Name: JOHNSON, PAULA A
Address: 1702 LOWRY AVENUE
City-St-Zip: LAKELAND, FL 33801

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: STR (X) Change ( ) Addition
Name: PEARRE, PAMELA J
Address: 2709 CHARLESTON DRIVE
City-St-Zip: PLANT CITY, FL 33563

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

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: GARY A. STONEKING PMTR 01/08/2006

Electronic Signature of Signing Officer or Director — Date