

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007627

FILED
Jan 18, 2005
Secretary of State

Entity Name: LIVING HOPE COMMUNITY CHURCH OF POINCIANA, INC

Current Principal Place of Business:

1664 REGAL OAKS DRIVE
KISSIMMEE, FL 34744 US

New Principal Place of Business:

1664 REGAL OAK DRIVE
KISSIMMEE, FL 34744 US

Current Mailing Address:

1664 REGAL OAKS DRIVE
KISSIMMEE, FL 34744 US

New Mailing Address:

1664 REGAL OAK DRIVE
KISSIMMEE, FL 34744 US

FEI Number: 20-1446757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BASSETT, DAVID
1664 REGAL OAKS DRIVE
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

BASSETT, DAVID
1664 REGAL OAK DRIVE
KISSIMMEE, FL 34744 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:

01/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BASSETT, DAVID
Address: 1664 REGAL OAKS DRIVE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: D () Delete
Name: LEONARD, FRANCIS
Address: 2304 KING CREST RD.
City-St-Zip: KISSIMMEE, FL 34744 US

Title: D () Delete
Name: CONNERS, MARK
Address: 725 PELICAN COURT
City-St-Zip: KISSIMMEE, FL 34759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BASSETT, DAVID
Address: 1664 REGAL OAK DRIVE
City-St-Zip: KISSIMMEE, FL 34744 US

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 for the exemption stated in Section 119.07(3)(i), 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: DAVID BASSETT

D

01/18/2005

Electronic Signature of Signing Officer or Director

Date