200	06 NOT-FOR-PR AMENDED AN	OFIT CORPO	RATION RT				
DOCUMENT # N0400008420					FI	FD	
1. Entity Name HOPE COMMUNITY CHURCH OF THE GULF COAST,				FILED 07 MAY -9 PM 2:53			
INC.				′			
7171 DAVIS HWY SUITE A20		Mailing Address 7171 DAVIS HWY SUITE PENSACOLA, FL 32504	7171 DAVIS HWY SUITE A20		ALLAHASS	STATE SE, FLORIDA	
2. Principal Place of Business 3.		3. Mailing Address	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		- 10182006 C	hg-NP (	CR2E037 (4/06)	
City & State		City & State		4. FEI Number 20-158420	)4		lied For
Zip	Country	Zip	Country	5. Certificate of St		<b>\$8.75</b> Addit	
	6. Name and Address of Current	t Registered Agent		7. Name and Add	Iress of New Regis	Fee Required	
MÁRTIN, TIMOTHY L			Name	et Address (P.O. Box Number is Not Acceptable)			
9031 WOODRUN LN PENSACOLA, FL 32514			Street Address	(P.U. Box Number Is	Not Acceptable)		
			City		<u> </u>	FL Zip Code	<u> </u>
	named entity submits this statement for	or the purpose of changing its r	egistered office or regist	ered agent, or both, in	the State of Florida		ind accept
the obligation	ons of registered agent.						
SIGNATURE	Signature, lyped or printed name of registered agen	I and little # applicable. (NOTE:	Registered Agent signature requi	ed when reinstaling)	· · · · · · · · · · · · · · · · · · ·	DATE	
		9. Election Cam	9. Election Campaign Financing Trust Fund Contribution.		Make	check payable to	
	Amended AR is \$61.25	Trust Fund Co	ontribution.	\$5.00 May Be Added to Fees	Florida	Department of Sta	
10.	OFFICERS AND D	IRECTORS	11.		<u> </u>	ND DIRECTORS IN 1	10
<b>10.</b> ТПLЕ NAME			_ <u></u>	Added to Fees	<u> </u>	ND DIRECTORS IN 1	ite
10. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	OFFICERS AND D P MARTIN, TIMOTHY L 8990 N. DAVIS HWY, APT. 1 PENSACOLA, FL 32514 VP	IRECTORS	11.       TITLE       NAME       STREET ADDRESS       CITY-ST-ZIP       TITLE	Added to Fees	ES TO OFFICERS A	ND DIRECTORS IN 1	10
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