

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 16, 2009
Secretary of State**

DOCUMENT# N04000011204

Entity Name: NEW HOPE COMMUNITY CHURCH OF NORTH PORT, AN AFFILIATED CHURCH OT THE CHRISTIAN AND MISSIONARY ALLIANCE, INC.

Current Principal Place of Business:

3459 NEMO AVENUE
NORTH PORT, FL 34287 US

New Principal Place of Business:

5600 S. BISCAYNE DRIVE
NORTH PORT, FL 34286 US

Current Mailing Address:

PO BOX 7317
NORTH PORT, FL 34290 US

New Mailing Address:

FEI Number: 20-1954861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEJESUS, EDWARD JR.
3459 NEMO AVE
NORTH PORT, FL 34287 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: PRES () Delete
Name: DEJESUS, EDWARD JR.
Address: 3459 NEMO AVENUE
City-St-Zip: NORTH PORT, FL 34287 US

Title: VP () Delete
Name: RICHARDSON, CLIFFORD
Address: 408 BLACKBURN BLVD
City-St-Zip: NORTH PORT, FL 34287 US

Title: TREA () Delete
Name: DEJESUS, NORMA L
Address: 3459 NEMO AVENUE
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: RICHARDSON, CLIFFORD
Address: 8498 BUMFORD AVE
City-St-Zip: NORTH PORT, FL 34287 US

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

I hereby certify that the information supplied with this filing does not qualify 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: NORMA L DEJESUS

TREA

01/16/2009

Electronic Signature of Signing Officer or Director

Date