

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002112

FILED
Aug 31, 2008
Secretary of State

Entity Name: HOPE IN JESUS MINISTRIES INC

Current Principal Place of Business:

5675 LINCOLN CIR E
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

PO BOX 540711
LAKE WORTH, FL 33454

New Mailing Address:

5675 LINCOLN CIR E
LAKE WORTH, FL 33463

FEI Number: 81-0670106 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MARGARETTE, FLEURINORD
5675 LINCOLN CIR E
LAKE WORTH, FL 33463 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FLEURINARD, MARGARETTE
Address: 5675 LINCOLN CIR E
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: DALMACY, SONY
Address: 5675 LINCOLN CIR E
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: VEILLARD, HUBERT
Address: 2788 LAKE IDA RD
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: FLEURINORD, MARGARETTE
Address: 5675 LINCOLN CIR
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: MARGARETTE FLEURINORD

D.

08/31/2008

Electronic Signature of Signing Officer or Director

Date