

2008 ~~NOT~~-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000003531

1. Entity Name
HOPEWELL MISSIONARY BAPTIST CHURCH, INC.



Principal Place of Business
7284 BOYNTON BEACH BLVD
BOYNTON BEACH, FL 33425

Mailing Address
P.O. BOX 990
BOYNTON BEACH, FL 33425

FILED
Apr 23, 2008 08:00 AM
Secretary of State



02262008 No Chg-NP CR2E037 (4/06)

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4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AUSTIN, E. NICHOLAS
1256 W. 27TH ST.
RIVIERA BEACH, FL 33404

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE E. Nicholas Austin E. Nicholas Austin 4/21/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

UD00000917568
05/13/08-80045-018 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AUSTIN, E. NICHOLAS 1256 W. 27TH ST. RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAAMES, RICHARD 1624 NE 2ND COURT BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILSON, ROSA 553 NW 11TH ST BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: E. Nicholas Austin E. Nicholas Austin 4/21/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #