

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007299

FILED
Sep 05, 2007
Secretary of State

Entity Name: NEW HOPE COMMUNITY MULTI-PURPOSE CENTER, INC.

Current Principal Place of Business:

4601 NW 183RD STREET G-10
G10
MIAMI GARDENS, FL 33055

New Principal Place of Business:

Current Mailing Address:

4601 NW 183RD STREET G-10
G10
MIAMI GARDENS, FL 33055

New Mailing Address:

FEI Number: 20-3178281 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:

SCOTT, ELIZABETH
4601 NW 183RD STREET #G-10
MIAMI GARDENS, FL 33055 US

Name and Address of New Registered Agent:

WHYMS, ALBERTA
4601 NW 183RD STREET #G-10
MIAMI GARDENS, FL 33055 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: ALBERTA WHYMS

09/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHYMS, ALBERTA
Address: 4601 NW 183RD STREET G-10
City-St-Zip: MIAMI GARDENS, FL 33055

Title: V () Delete
Name: CORTES, DIONE
Address: 9011 NE 2ND AVE
City-St-Zip: EL PORTAL, FL 33138

Title: S () Delete
Name: DRAKES, ANNETTE
Address: 13101 MEMORIAL HWY #103
City-St-Zip: N MIAMI, FL 33161

Title: T () Delete
Name: DUNCANSON-JONES, DEBBIE
Address: 1230 NE 124TH ST PH2
City-St-Zip: N MIAMI, FL 33161

Title: D () Delete
Name: ALUBI, NELSON
Address: 4601 NW 183RD STREET G-10
City-St-Zip: MIAMI GARDENS, FL 33055

Title: D () Delete
Name: WHYMS, SHANNON
Address: 4601 NW 183RD STREET G-10
City-St-Zip: MIAMI GARDENS, FL 33055

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:

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: ALBERTA WHYMS

P

09/05/2007

Electronic Signature of Signing Officer or Director

Date