

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007299

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

13335 NW 17TH PLACE  
MIAMI, FL 33167

**New Principal Place of Business:**

**Current Mailing Address:**

13335 NW 17TH PLACE  
MIAMI, FL 33167

**New Mailing Address:**

**FEI Number:** 20-3178281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BETTERSON, ALBERTA L  
13335 NW 17TH PLACE  
MIAMI, FL 33167 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: PD  
Name: BETTERSON, ALBERTA  
Address: 13335 NW 17TH PLACE  
City-St-Zip: MIAMI, FL 33167

Title: VD  
Name: CORTES, DIONE  
Address: 1862 SW152 TERR  
City-St-Zip: MIRAMAR, FL 33027

Title: D  
Name: SABATOSSO, ANTHONY DR.  
Address: 13335 NW 17PL  
City-St-Zip: MIAMI, FL 33167

Title: D  
Name: ALUBI, NELSON  
Address: 13335 NW 17TH PLACE  
City-St-Zip: MIAMI, FL 33167

Title: D  
Name: WHYMS, SHANNON  
Address: 13335 NW 17TH PLACE  
City-St-Zip: MIAMI, FL 33167

I hereby 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 all other like empowered.

SIGNATURE: ALBERTA L. BETTERSON

PD

03/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date