2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N06000000935

Entity Name: HOPE APOSTOLIC CHURCH OF JESUS CHRIST INC.

Current Principal Place of Business:

23021 AVENUE D
ALVA, FL 33920

New Principal Place of Business:

Current Mailing Address:

POST OFFICE 961
ALVA, FL 33920

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JENKINS, JOHNNIE
23181 ROUND TREE AVENUE
ALVA, FL 33920 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	( ) Delete
Name:	JENKINS, JOHNNIE	
Address:	23181 ROUND TREE AVENUE	
City-St-Zip:	ALVA, FL 33920	
Title:	VC	( ) Delete
Name:	JENKINS, LAWARETHA	
Address:	23181 ROUND TREE AVENUE	
City-St-Zip:	ALVA, FL 33920	
Title:	S	( ) Delete
Name:	SHARP, RENA SISTER	
Address:	3441 CANAL STREET	
City-St-Zip:	FORT MYERS, FL 33916	
Title:	T	( ) Delete
Name:	SHARP, LEROY	
Address:	3441 CANAL STREET	
City-St-Zip:	FORT MYERS, FL 33916	
Title:	S	( ) Delete
Name:	MORLE, MARY L	
Address:	1299 STEAMANS STREET	
City-St-Zip:	AVON PARK, FL 33825	
Title:	M	( ) Delete
Name:	SMITH, REUBEN M	
Address:	1621 SEABOARD STREET	
City-St-Zip:	FORT MYERS, FL 33916	

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:	S	(X) Change ( ) Addition
Name:	CASEY, MARY A	
Address:	1830 32 ST	
City-St-Zip:	SARASOTA, FL 34234	
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: LAWERTHA T JENKINS VP 04/30/2007
Electronic Signature of Signing Officer or Director — Date