2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2011
Secretary of State

DOCUMENT# N06000005344

Entity Name: SWEET HOPE MINISTRIES, INC.

Current Principal Place of Business:

426 JOHNOSN BLVD
LIVE OAK, FL 32064

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1442
LIVE OAK, FL 32064

New Mailing Address:

FEI Number: 20-4992414 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SMITH, A
426 JOHNSON BLVD
LIVE OAK, FL 32064 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: VD
Name: ALLEN, DONNIE
Address: 808 HARRELL AVE
City-St-Zip: LIVE OAK, FL 32064

Title: PD
Name: SMITH, ALFRED
Address: 426 JOHNSON BLVD
City-St-Zip: LIVE OAK, FL 32064

Title: TD
Name: BUTLER, LARRY
Address: 5570 BULB FARM RD
City-St-Zip: WELLBORN, FL 32094

Title: SD
Name: SMITH, THERESA B
Address: 426 JOHNSON BLVD
City-St-Zip: LIVE OAK, FL 32064

Title: D
Name: BUTLER, CHINNETA
Address: 5570 BULB FARM RD
City-St-Zip: WELLBORN, FL 32094

Title: D
Name: BROWN, FRANCENE
Address: 11748 142ND TERR.
City-St-Zip: LIVE OAK, FL 32060

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: ALFRED SMITH PD 02/25/2011

Electronic Signature of Signing Officer or Director Date