

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010197

FILED
Apr 27, 2012
Secretary of State

Entity Name: WORLD HOPE MISSIONS MINISTRY, INC.

Current Principal Place of Business:

524 TIMBER RIDGE DR.
LONGWOOD, FL 32779 US

New Principal Place of Business:

924 N MAGNOLIA AVENUE
303
ORLANDO, FL 32803 US

Current Mailing Address:

POST OFFICE BOX 915753
LONGWOOD, FL 327915753 US

New Mailing Address:

FEI Number: 20-5637718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOREIRA, JONATHAS D
524 TIMBER RIDGE DRIVE
LONGWOOD, FL 32779 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: DR.
Name: NELSON, GARY L JR
Address: 609 FRONT STREET
City-St-Zip: CELEBRATION, FL 34747 US

Title: REV.
Name: MOREIRA, JONATHAS D
Address: 524 TIMBER RIDGE DR
City-St-Zip: LONGWOOD, FL 327792626 US

Title: DR.
Name: MELLO, LILIAN
Address: 524 TIMBER RIDGE DR
City-St-Zip: LONGWOOD, FL 327792626 US

Title: MS.
Name: CHELSEA, POPE
Address: 415 OLD HOMESTEAD TRAIL
City-St-Zip: DULUTH, GA 300978027 US

Title: MR.
Name: ALTAMIRANDO, PORTUGAL C
Address: 4587 TIGUA ISALAND CT.
City-St-Zip: WINTER PARK, FL 32792 US

Title: REV.
Name: WILLIAM, MIKLER P
Address: 431 KENTWOOD CT.
City-St-Zip: SANFORD, FL 32771 US

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: JONATHAS MOREIRA

REV

04/27/2012

Electronic Signature of Signing Officer or Director

Date