

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 23, 2008  
Secretary of State**

DOCUMENT# N06000011733

Entity Name: DOOR OF HOPE CHURCH INC.

**Current Principal Place of Business:**

2306 JIM LEE RD  
TALLAHASSEE, FL 32310

**New Principal Place of Business:**

**Current Mailing Address:**

2306 JIM LEE RD  
TALLAHASSEE, FL 32310

**New Mailing Address:**

FEI Number: 32-0187527      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

ELLIOTT, JOE  
2306 JIM LEE RD  
TALLAHASSEE, FL 32310      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: ELLIOTT, JOE  
Address: 2306 JIM LEE RD  
City-St-Zip: TALLAHASSEE, FL 32310

Title: VTD ( ) Delete  
Name: COTHRAN, CHARLES M  
Address: 1128 OCALA RD APT 1-5  
City-St-Zip: TALLAHASSEE, FL 32304

Title: SD ( ) Delete  
Name: ELLIOTT, BEVERLYN  
Address: 2306 JIM LEE RD  
City-St-Zip: TALLAHASSEE, FL 32310

**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:

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: BEVERLYN ELLIOTT

SD

07/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date