

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008695

FILED
Mar 09, 2009
Secretary of State

Entity Name: NEIGHBORHOOD HOPE CHEST, INC.

Current Principal Place of Business:

5570-B WENDY LANE
BASCOM, FL 32423

New Principal Place of Business:

5570 WENDY LANE
BASCOM, FL 32423

Current Mailing Address:

P. O. BOX 331
MALONE, FL 32445

New Mailing Address:

FEI Number: 51-0493291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COOKS, VENUS L
5850 CATALINA LANE
GREENWOOD, FL 32443 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: WALKER, JOE A
Address: 5570 WENDY LANE
City-St-Zip: BASCOM, FL 32423

Title: S () Delete
Name: NEWTON, SHELLY
Address: 5570-C WENDY LANE
City-St-Zip: BASCOM, FL 32423

Title: AT () Delete
Name: PEAK, MICHAEL
Address: 5720 SNOWHILL RD.
City-St-Zip: MALONE, FL 32445

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: JOE ANN WALKER

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date