2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011263

FILED Apr 29, 2008 Secretary of State

Entity Name: NEW HOPE CHRISTIAN COUNSELING, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
450 LEE AV SATELLITE	VENUE E BEACH, FL	32937				
Current Mailing Address:				New Mailing Address:		
P.O. BOX 3 SATELLITE	372388 E BEACH, FL	32937				
FEI Number:	77-0706373	FEI Number Applied For	() FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SMITH, NICHOLAS W 450 LEE AVENUE SATELLITE BEACH, FL 32937 US						
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.						
SIGNATUR	RE:					
Electronic Signature of Registered Agent					Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SMITH, NICHO 514 BAY CIRC			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SMITH, LINDA 514 BAY CIRC) Delete :LE DUR BEACH, FL 32937		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HEIMLICH, KIF	SHORES DRIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NICHOLAS W SMITH PRES 04/29/2008