

N12000005764

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Bruce Hoja GAVE
AUTHORIZATION BY PHONE TO
CORRECT Article IV
DATE _____
PS

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RECEIVED APR 30 2012

05/01/12--01004--017 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUN 11 PM 3:17



*Corrected
copy*

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2012

REV. JANIE HOGAN
1110 EAGLES NEST AVE
DELTONA, FL 32725

SUBJECT: NEW HOPE COMMUNITY OUTREACH CHURCH
Ref. Number: W12000023958

RECEIVED
DIVISION OF STATE
TALLAHASSEE, FLORIDA

12 JUN -4 PM 2:44

RECEIVED

We have received your document for NEW HOPE COMMUNITY OUTREACH CHURCH and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith
Regulatory Specialist II

Letter Number: 912A00013165

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: New Hope Community Outreach Church
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee &
Certificate of
Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Rev. Janie Hogan
Name (Printed or typed)

1110 Eagles Nest Ave
Address

Deltona, Florida 32725
City, State & Zip

New Hope Community Outreach Church
New Hope Community Outreach Church

Hogaj@aol.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME New Hope Community Outreach Church, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address: New Hope Community Outreach Church, INC.
500 W. 4th Street
Sanford, FL 32771
Mailing address, if different is: 1110 Eagles Nest Avenue
Deltona, FL 32725

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
The purpose of this organization is organized for the worship of Jesus Christ and the teaching of its members to fulfill the Great command of promoting the gospel of Christianity.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:
The ~~directors~~ of the organization are appointed by the pastor with an approval of a majority of the vote from the congregation.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

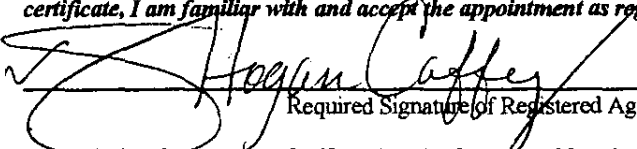
Name and Title: <u>Rev. Janie Caffey, Pastor</u>	Name and Title: _____
Address: <u>1110 Eagles Nest Ave</u>	Address: _____
<u>Deltona, Florida 32725</u>	_____
_____	_____
Name and Title: <u>Rev. Elias Caffey, Treasurer</u>	Name and Title: _____
Address: <u>1110 Eagles Nest Ave</u>	Address: _____
<u>Deltona, Florida 32725</u>	_____
_____	_____
Name and Title: <u>Barbara Bradford, Secretary</u>	Name and Title: _____
Address: <u>1209 West 8th Street</u>	Address: _____
<u>Sanford, Florida 32771</u>	_____
_____	_____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Rev. Janie Caffey
Address: 1110 Eagles Nest Ave
Deltona, Florida 32725

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Rev. Felton O. Best
Address: 245 Unionville Ave
Plainville, CT. 06062

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DIVISION OF CORPORATIONS
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

 Required Signature of Registered Agent
Date: 4-26-2012

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Rev. Felton O. Best Required Signature of Incorporator
Date: 4-26-2012