2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 22, 2008 8:00 am DOCUMENT # N13481 **Secretary of State** 1. Entity Name 02-22-2008 90016 015 ****61.25 NEW HOPE BAPTIST CHURCH OF BARTOW, INC. Principal Place of Business Mailing Address P O BOX 2287 BARTOW FL 33831 1347 GASKIN RD. S. BARTOW FL 33830 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apr. #, erc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2513059 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BULLOCH, DEWEY Street Address (P.O. Box Number is Not Acceptable) 845 E STUART ST BARTOW,FL 33830 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of requirered agent terrilatic Lappicable. (NOTE: Bogistered Agent signature red cred when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State and profession of the first first first from the 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Delete Change JONES, MERTICE NAME NAME 1590 S. MCADOO AVE. STREET ADDRESS STREET ADDRESS BARTOW FL CITY-ST-ZIP CITY-ST-ZiP TD TITLE ☐ Delate VTB 5 Change : Addition BAREFOOT, EVELYN NAME NAME Vice President 215 EDGEWOOD AVE NO STREET ADDRESS STREET ADDRESS TREASURER/DIRECTOR Secretary BARTOW FL CITY-ST-ZIP CITY-ST-ZIP *33830-422*8 TITLE ☐ Delete TITLE DS Change ___ Addition_ SUMMERS, MARILYN NAME NAME 2055 S FLORAL AVE #306 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BARTOW FL 33830 CITY-ST-ZIP TITLE ☐ Delete TITLE [] Change ☐ Addition FRITCHIE, DAVE NAME NAME 2055 S FLORAL AVE #251 STREET ADDRESS STREET ADDRESS BARTOW FL 33830 CITY-ST-2(P CITY-ST-ZIP T D TITLE ☐ Delete HILE Change neitibbA 🔲 PRICE, RICHARD NAME NAME 2055 S. FLORAL AVE #242 STREET AUDRESS STREET ADDRESS BARTOW FL 33830 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

SIGNATURE: Brelyn BAREFOOT EVELYN BAREFOOT 2/12/08 863-533-8079