

N 15000009551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

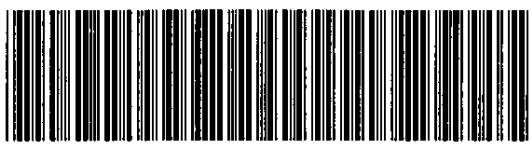
(Business Entity Name)

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DIVISION OF CORPORATIONS
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10/01/15

COVER LETTER

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

SUBJECT: New Hope Community of Faith Ministries
(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: Nancy S. Thomas - Lockwood
Name (Printed or typed)

713 Bogie Ct
Address

Kissimmee, FL 34759
City, State & Zip

912-492-7006
Daytime Telephone number

nancythomas415@gmail.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

The name of the corporation shall be: New Hope Community of faith ministries, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

621 Notre Dame Way
Kissimmee, FL
34759

Mailing address, if different is:

621 Notre Dame Way
Kissimmee, FL
34759

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Bring hope to all people w. th the compassion of Christ, to share the good news of the gospel, and to create ministries to help all we can strength the community.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: voting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: N. Thomas - Pastor
Address: 713 Bogie Ct
Kissimmee, FL
34759

Name and Title: J. Parker - Pastor
Address: 621 Notre Dame Way
Kissimmee, FL
34759

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: S. Hardee - Board mem
Address: 121 Bergen Circle
Auburndale, FL
33823

Name and Title: R. Wilson - Board
Address: 1027 W. 12th St
Lakeland, FL
33805

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Board

Name and Title: B. Lockwood-Board Name and Title: _____

Address: 713 Bogie Ct Address: _____
Kissimmee, FL _____
34759 _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: James E Parker
Address: 621 Notre Dame Way
Kissimmee, FL 34759

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nancy J. Thomas
Address: 713 Bogie Ct
Kissimmee, FL 34759

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

James E. Parker
Required Signature of Registered Agent

9/22/2015
Date

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.

[Signature]
Required Signature of Incorporator

9/22/2015
Date