2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18997

FILED Apr 25, 2008 Secretary of State

Entity Name: NEW HOPE MISSIONARY BAPTIST CHURCH OF HOLLYWOOD, INC.

Current Principal Place of Business:			New Principal Place of Business:		
2305 SHEF HOLLYWO	RIDAN ST OOD, FL 3302	02041 US			
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
2305 SHEF HOLLYWO	RIDAN ST OOD, FL 3302	02041 US			
FEI Number: 65-0013986 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:	Name and Addre	ess of New Registered Agent:	
FLEMMING 2305 SHEF HOLLYWO		0 US			
The above in the State		submits this statement for the p	surpose of changing its regi	stered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Age	ent	Date	
OFFICERS	AND DIREC	TORS:	ADDITIONS/CH/	ANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (DAWSON, VIR 2305 SHERIDA HOLLYWOOD,	IN ST	Address: 2305	(X) Change()Addition S, ANDREW SHERIDAN ST YWOOD, FL	
Title: Name: Address: City-St-Zip:	WALKER, SAN 2305 SHERIDA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GRAHAM, EDV 2305 SHERIDA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FLEMMING, JO 2301 SHERIDA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JOHNSON, CO 2305 SHERIDA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GATES, RHON 2305 SHERIDA		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: SANDRA WALKER D 04/25/2008