2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29606

FILED Jan 23, 2009 Secretary of State

Entity Name: NEW HOPE COMMUNITY CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 6400 NW 31ST AVE FORT LAUDERDALE, FL 33309 US **Current Mailing Address: New Mailing Address:** 6400 NW 31ST AVE FORT LAUDERDALE, FL 33309 US FEI Number: 59-6141923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KIRBY, WILLIAMS KIRBY, WILLIAMS PASTOR 6550 NE 21ST DR 6550 NE 21ST DR. FORT LAUDERDALE, FL 33308 US FORT LAUDERDALE, FL 33308 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: VIVIAN WHEELER 01/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

FORT LAUDERDALE, FL 33309

in the State of Florida.

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete () Change () Addition SLAGER, BILL Name: Name: 5510 SW 7TH ST. Address: Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip: Title: DEAC () Delete Title: () Change () Addition Name: JEANNIE, TANIS Name: Address: 6530 NW 34TH AVE Address: City-St-Zip: FT LAUDERDALE, FL 33309 City-St-Zip: Title: ELDE () Delete Title: () Change () Addition BOB, BALFOORT Name: Name: 1040 NW 45TH AVE Address: Address: City-St-Zip: COCONUT CREEK, FL 33066 City-St-Zip: Title: **TRES** () Delete Title: () Change () Addition Name: VIVIAN, WHEELER Name: Address: 3137 NW 65TH DR. Address:

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.

City-St-Zip:

SIGNATURE: VIVIAN WHEELER TRES 01/23/2009