

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2007 8:00 am
Secretary of State

03-01-2007 90013 021 ****61.25

DOCUMENT # N30807

1. Entity Name
NEW HOPE ASSEMBLY OF GOD CHURCH INC.



Principal Place of Business
**9550 CHUMUCKLA HWY
HWY 197
JAY, FL 32565 US**

Mailing Address
**9550 CHUMUCKLA HWY
JAY, FL 32565 US**

40026761



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02032007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-2646228

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MILLER, JAMES
2624 HWY 178
JAY, FL 32565**

Name

Stephen Zepp

Street Address (P.O. Box Number is Not Acceptable)

9355 Chumuckla Hwy

City

Peace

FL

Zip Code

32571

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

Stephen Zepp

Signature, typed or printed name of registered agent, and this applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-25-07

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **MILLER, JIM**
CITY-ST-ZIP **2624 HIGHWAY 178**
JAY, FL 32565

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **CARNLEY, NADINE**
CITY-ST-ZIP **9331 CHUMUCKLA HWY.**
MILTON, FL 32571

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **MILLER, DEBORAH**
CITY-ST-ZIP **2624 HIGHWAY 178**
JAY, FL 32565

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **COOK, CHARLES**
CITY-ST-ZIP **2201 HWY 182**
JAY, FL 32565

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **STRICKLING, KEITH**
CITY-ST-ZIP **6704 MARTIN RD**
MILTON, FL 32570

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

Stephen Zepp

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-25-07

850-995-5821