2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30807

FILED Feb 10, 2009 Secretary of State

Entity Name: NEW HOPE ASSEMBLY OF GOD CHURCH INC.

Current Principal Place of Business: New Principal Place of Business: 9550 CHUMUCKLA HWY **HWY 197** JAY, FL 32565 **New Mailing Address: Current Mailing Address:** 9550 CHUMUCKLA HWY JAY, FL 32565 FEI Number: 30-1526067 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: ZEPP, STEPHEN HELLUMS, DAN 9355 CHUMUCKLA HWY 5551 DUPREE RD US PACE, FL 32571 MILTON, FL 32570 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. SIGNATURE: DAN HELLUMS 02/10/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MILLER, JIM COOK, LANCE Name: Name: 2624 NEW YORK ST Address: 2201 HWY 182 Address: City-St-Zip: JAY, FL 32565 City-St-Zip: JAY, FL 32565 Title: Title: () Delete () Change () Addition CARNLEY, NADINE Name: Name: Address: 9331 CHUMUCKLA HWY. Address: City-St-Zip: MILTON, FL 32571 City-St-Zip: Title: () Delete Title: (X) Change () Addition MILLER, DEBORAH Name: GERMANN, KARLA Name: 2624 NEW YORK ST 3928 WILLARD NORRIS RD Address: Address: City-St-Zip: JAY, FL 32565 City-St-Zip: PACE, FL 32571 Title: () Delete Title: D (X) Change () Addition Name: TAYLOR, GREG Name: TAYLOR, GREG 3195 WHITLEY LN Address: MISC Address: City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571 Title: () Delete Title: () Change () Addition STRICKLING, KEITH Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: KEITH STRICKLING Т 02/10/2009

3059 HARVEST RD

JAY, FL 32565

Address:

City-St-Zip: