

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37560

FILED
Jun 05, 2008
Secretary of State

Entity Name: NEW HOPE BAPTIST CHURCH OF WHITE CITY, INC.

Current Principal Place of Business:

5200 OLEANDER AVE
FT. PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

5200 OLEANDER AVE
FT. PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 65-0140173 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GIAQUINTO, BRIAN R P
5200 OLEANDER AVE
FT. PIERCE, FL 34982 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THELWELL, TREVOR
Address: 5200 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: TD () Delete
Name: STEVENS, BARBARA
Address: 5200 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: SD () Delete
Name: BROWN, BETH
Address: 5200 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: P () Delete
Name: GIAQUINTO, BRIAN R
Address: 804 EMIL AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: GIONAKIS, CASEY
Address: 5200 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: GIAQUINTO, BRIAN R
Address: 5200 OLEANDER AVENUE
City-St-Zip: FORT PIERCE, FL 34982

Title: VP () Change (X) Addition
Name: MONOKIAN, STEVE
Address: 5200 OLEANDER AVENUE
City-St-Zip: FORT PIERCE, FL 34982

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: BRIAN R. GIAQUINTO

P

06/05/2008

Electronic Signature of Signing Officer or Director

Date