

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N37560

FILED
Jul 15, 2003
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 ()

Name and Address of Current Registered Agent:

BRUHN, WANDA D
5200 OLEANDER AVE
FT. PIERCE, FL 34982 US

Name and Address of New Registered Agent:

PATTEN, PAT PASTOR
5200 OLEANDER AVE
FT. PIERCE, FL 34982 US

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: PAT PATTEN, PASTOR

07/15/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: TEDDER, JIM
Address: 5200 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: TD () Delete
Name: HOLLOWAY, TERRY
Address: 5200 OLEANDER AVE
City-St-Zip: FT PIERCE, FL 34782

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: PERRY, KEVIN
Address: 5200 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: TD (X) Change () Addition
Name: KILEY, JEANNETTE
Address: 5200 OLEANDER AVE
City-St-Zip: FT PIERCE, FL 34782

Title: SD (X) Change () Addition
Name: RIVAS, BECKY
Address: 5200 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEVIN PERRY

CD

07/15/2003

Electronic Signature of Signing Officer or Director

Date