

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # N48946
 1. Entity Name
NEW HOPE MISSIONARY BAPTIST CHURCH OF HUDSON, FL., INC.



Principal Place of Business Mailing Address
14236 COUNTY LINE ROAD HUDSON FL 34667-6467 **14236 COUNTY LINE ROAD HUDSON FL 34667-6467**

2. Principal Place of Business Suite, Apt. #, etc
 City & State Zip Country

3. Mailing Address Suite, Apt. #, etc
 City & State Zip Country



1st MOORE CR2E037 (10/04)

4. FEI Number **59-3130341**
 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
DRAYTON, ROBERT
11345 COPLEY COURT
SPRING HILL FL 34609

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 *Mr Robert Drayton* DATE **29 Jan 2005**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

TITLE	T	<input type="checkbox"/> Delete
NAME	BROWDY, RONALD	
STREET ADDRESS	12042 VILLA ROAD	
CITY-ST-ZIP	SPRING HILL FL 34609	
TITLE	D	<input type="checkbox"/> Delete
NAME	TELMAN, BIRTRAM	
STREET ADDRESS	136 CENTER OAK CIRCLE	
CITY-ST-ZIP	SPRING HILL FL 34609	
TITLE	T	<input type="checkbox"/> Delete
NAME	ROSARIO, LESLIE	
STREET ADDRESS	7423 TANAWANDA TRAIL	
CITY-ST-ZIP	SPRING HILL FL 34609	
TITLE	T	<input type="checkbox"/> Delete
NAME	JOYNER, JACQUELINE	
STREET ADDRESS	11311 FOX RUN DRIVE	
CITY-ST-ZIP	SPRING HILL FL 34668	
TITLE	T	<input type="checkbox"/> Delete
NAME	DRAYTON, ROBERT	
STREET ADDRESS	11345 COPLEY COURT	
CITY-ST-ZIP	SPRING HILL FL 34609	
TITLE	D	<input type="checkbox"/> Delete
NAME	SCARBOROUGH, LESTER	
STREET ADDRESS	11443 FERENDINA WAY	
CITY-ST-ZIP	SPRING HILL FL 34609	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	U000000219899	
CITY-ST-ZIP	02/08/05-80045-009 61.25	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Mr Robert Drayton* DATE: **29 Jan 2005** DAYTIME PHONE #: **(352) 683 0918**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR