


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 19, 2006 8:00 am
Secretary of State

04-28-2006 90188 032 ****61.25

DOCUMENT # N48946 1. Entity Name NEW HOPE MISSIONARY BAPTIST CHURCH OF HUDSON, FL., INC.					
Principal Place of Business 14236 COUNTY LINE ROAD HUDSON, FL 34667-6467			Mailing Address 14236 COUNTY LINE ROAD HUDSON, FL 34667-6467		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-3130341	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
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 obligation					
SIGNATURE _____ (NOTE: Registered Agent signature required when releasing)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	T BROWDY, RONALD 12042 VILLA ROAD SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DYANNE BURNS CRAIG 17434 MAGGIE COURT SPRING HILL, FL. 34610	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TELMAN, BIRTRAM 136 CENTER OAK CIRCLE SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROSARIO, LESLIE 7423 TANAWANDA TRAIL SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOYNER, JACQUELINE 11311 FOX RUN DRIVE SPRING HILL, FL 34668		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DRAYTON, ROBERT 11345 COPLEY COURT SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCARBOROUGH, LESTER 11443 FERENDINA WAY SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 817, 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 E. DRAYTON			TRUSTEE		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 12 APRIL 2006 (727) 856 8336		

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