2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48946

FILED Aug 13, 2009 Secretary of State

Entity Name: NEW HOPE MISSIONARY BAPTIST CHURCH OF HUDSON, FL., INC.

Current Principal Place of Business: New Principal Place of Business: 14236 COUNTY LINE ROAD HUDSON, FL 346676467 **Current Mailing Address: New Mailing Address:** 14236 COUNTY LINE ROAD HUDSON, FL 346676467 FEI Number: 59-3130341 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: Name and Address of New Registered Agent: RAWKINS, ROBBIN RAWLINS, ROBBIN 7388 HOLIDAY DR 7388 HOLIDAY DR SPRING HILL, FL 34606 SPRING HILL, FL 34606 US 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: ROBBIN RAWLINS 08/13/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CHESTEEN, LARRY Name: Name: Address: 5399 FAIRHAVEN AVE. Address: City-St-Zip: SPRING HILL, FL 34608 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TELMAN, BIRTRAM Name: Address: 136 CENTER OAK CIRCLE Address: City-St-Zip: SPRING HILL, FL 34609 City-St-Zip: Title: () Delete Title: () Change () Addition KING, SANDRA Name: Name: 11971 LINDEN AVE Address: Address: City-St-Zip: SPRING HILL, FL 34608 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RAWLINS, ROBBIN Name: Address: 7388 HOLIDAY DR Address: City-St-Zip: SPRING HILL, FL 34606 City-St-Zip: Title: Title: () Delete () Change (X) Addition BROOKS, CLAUDE Name: Name: 12143 INFINITY DRIVE Address: Address: NEW PORT RICHEY, FL 34654 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition GLOVER, JOSEPH W II Name: Name: Address: Address: 9357 MIRACLE DR SPRING HILL, FL 34608 City-St-Zip: City-St-Zip:

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: ROBBIN RAWLINS T 08/13/2009