

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003538

FILED
Apr 06, 2005
Secretary of State

Entity Name: HOPE MINISTRY, INC.

Current Principal Place of Business:

PO BOX 70
ORLANDO, FL 32802

New Principal Place of Business:

Current Mailing Address:

PO BOX 70
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-3194422 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREED, PAUL D DR
315 E. ROBINSON STREET
SUITE 600
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

FREED, PAUL D DR
PO BOX 70
ORLANDO, FL 23802 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: _____

Electronic Signature of Registered Agent

04/06/2005

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FREED, PAUL D DR
Address: 315 E. ROBINSON ST., SUITE 600
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: CRAWFORD, PAUL R
Address: C/O PO BOX 70 NA
City-St-Zip: ORLANDO, FL 32802

Title: D () Delete
Name: FREED, SANDRA L
Address: C/O PO BOX 70 N/A
City-St-Zip: ORLANDO, FL 32802

Title: D () Delete
Name: BARKLEY, GLENN DR
Address: C/O PO BOX 70 N/A
City-St-Zip: ORLANDO, FL 32802

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FREED, PAUL D DR
Address: C/O PO BOX 70 N/A
City-St-Zip: ORLANDO, FL 32802

Title: S (X) Change () Addition
Name: CRAWFORD, PAUL R
Address: 5050 CARILLON
City-St-Zip: WINDERMERE, FL 34786

Title: V (X) Change () Addition
Name: FREED, SANDRA L
Address: C/O PO BOX 70 N/A
City-St-Zip: ORLANDO, FL 32802

Title: T (X) Change () Addition
Name: BARKLEY, GLENN DR
Address: 2760 GRANTHAM CT
City-St-Zip: ORLANDO, FL 32835

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: GLENN BARKLEY

Electronic Signature of Signing Officer or Director

T

04/06/2005

Date