2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2010
Secretary of State

DOCUMENT# N93000005742

Entity Name: NEW HOPE NEW FAITH MINISTRIES, INC.

Current Principal Place of Business:

5552 CAPITAL CIR. N.W.
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

2236 CAPITAL CIR. N.E.
SUITE 203
TALLAHASSEE, FL 32308 US

Current Mailing Address:

PO BOX 6265
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 59-3227494 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BOSTIC, GLENN F
5552 CAPITAL CIRCLE NW
TALLAHASSEE, FL 32314 US

Name and Address of New Registered Agent:

BOSTIC, GLENN F
2236 CAPITAL CIRCLE NE
SUITE 203
TALLAHASSEE, FL 32308 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: 07/16/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BOSTIC, GLENN F
Address: 2824 BOTANY PLACE
City-St-Zip: TALLAHASSEE, FL 32301

Title: VD
Name: BOSTIC, DEBORAH C
Address: 2824 BOTANY PLACE
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD
Name: LYNN, GWENDOLYN R
Address: 2128 SEMINOLE DR.
City-St-Zip: TALLAHASSEE, FL 32301

Title: SD
Name: TRIPLETT, ANTHONY
Address: P.O. BOX 9601
City-St-Zip: LOWELL, MA 01853 US

I hereby 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 all other like empowered.

SIGNATURE: GWENDOLYN R. LYNN TD 07/16/2010
Electronic Signature of Signing Officer or Director Date