

FILE NOW: FILING FEE IS \$61.25

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Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000000803 (6)
1. Corporation Name
NEW HOPE CHURCH OF GOD IN CHRIST OF ORLANDO, INC



Principal Place of Business 1410 WEST 30TH STREET ORLANDO FL 32805	Mailing Address 1410 WEST 30TH STREET ORLANDO FL 32805
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3. Date Incorporated or Qualified 02/14/1994	
4. FEI Number 59-0938130	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**HENDERSON, LOUIS J R.
4645 W CONLEY ST
ORLANDO FL 32811**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE DC	<input type="checkbox"/> DELETE
NAME HENDERSON, LOUIS	
STREET ADDRESS 4645 W. CONLEY ST.	
CITY-ST-ZIP ORLANDO FL 32811	
TITLE D	<input type="checkbox"/> DELETE
NAME HENDERSON, CASSANDRA	
STREET ADDRESS 4645 W. CONLEY ST.	
CITY-ST-ZIP ORLANDO FL 32811	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME JOHNSON, COREY	
STREET ADDRESS 907 WASHINGTON STREET	
CITY-ST-ZIP ORLANDO FL 32811	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME JOHNSON, THERESSA	
STREET ADDRESS 907 WASHINGTON STREET	
CITY-ST-ZIP ORLANDO FL 32811	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME WILLIAMS, MATTIE	
STREET ADDRESS 4546 MALIBU STREET	
CITY-ST-ZIP ORLANDO FL 32811	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME ROSS, JOEL	
STREET ADDRESS 4768 CROSSROADS COURT	
CITY-ST-ZIP ORLANDO FL 32811	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME Erica Vinson	
1.3 STREET ADDRESS 3024 N. Powers Dr. #14	
1.4 CITY-ST-ZIP Orlando, Fla. 32818	
2.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME Darrell Elijah Dobson	
2.3 STREET ADDRESS 700 Grove Ave.	
2.4 CITY-ST-ZIP Orlando, Fla. 32805	
3.1 TITLE C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME Deborah Kilgore	
3.3 STREET ADDRESS 1826 Whitney Way #202	
3.4 CITY-ST-ZIP Winter Park, Fla. 32792	
4.1 TITLE S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME Rosie Cooper	
4.3 STREET ADDRESS 1439 Kaurume Ct.	
4.4 CITY-ST-ZIP Orlando, Fla 32818	
5.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME Robin Ross	
5.3 STREET ADDRESS 4768 Cross Roads Ct.	
5.4 CITY-ST-ZIP Orlando, Fla. 32811	
6.1 TITLE T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME Melvenie Moore	
6.3 STREET ADDRESS 1421 30th Street	
6.4 CITY-ST-ZIP Orlando, Fla. 32805	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ V 3/10/98 V 407642-8897

CFR2E037 (10/97)