

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 15, 2009  
Secretary of State**

DOCUMENT# N94000000803

Entity Name: NEW HOPE MINISTRIES OF ORLANDO INC.

**Current Principal Place of Business:**

1410 WEST 30TH STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

1410 WEST 30TH STREET  
ORLANDO, FL 32805

**New Mailing Address:**

FEI Number: 20-0890456      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HENDERSON, LOUIS J R.  
7957 RIFFLE LANE  
ORLANDO, FL 32818      US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DC      ( ) Delete  
Name: HENDERSON, LOUIS  
Address: 7957 RIFFLE LANE  
City-St-Zip: ORLANDO, FL 32818

Title: D      ( ) Delete  
Name: HENDERSON, CASSANDRA  
Address: 7957 RIFFLE LANE  
City-St-Zip: ORLANDO, FL 32818

Title: D      ( ) Delete  
Name: BARNES, DHALIA  
Address: 1421 30 STREET  
City-St-Zip: ORLANDO, FL 32805

Title: D      ( ) Delete  
Name: JOHNSON, COREY  
Address: 1728 28 STREET  
City-St-Zip: ORLANDO, FL 32805

Title: S      ( ) Delete  
Name: COOPER, ROSIE  
Address: 4202 ILENE COURT  
City-St-Zip: ORLANDO, FL 32806

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: MITCHELL, CRYSTAL  
Address: 4546 WEST CONLEY  
City-St-Zip: ORLANDO, FL 32810

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: ROSIE COOPER

TD

04/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date