

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001329

FILED
Feb 26, 2009
Secretary of State

Entity Name: NEW HOPE HOLINESS CHURCH, INC.

Current Principal Place of Business:

738 TYLER STREET
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

5744 CLEVELAND RD
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 59-3230871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, MARY C
5744 CLEVELAND RD
JACKSONVILLE, FL 32209 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: P () Delete
Name: BROWN, MARY C
Address: 775 E 57TH ST
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: BROWN, ANTHONY
Address: 775 E 57TH ST
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: SANDERS, LENA
Address: 120 E 44TH ST
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: JOHNSON, TONYA ALICIA
Address: 3883 N.W. CTY HWY. 316
City-St-Zip: RIDDICK, FL 32686

Title: D () Delete
Name: SOLOMON, JIMMY M
Address: 1311 HARRISON ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: JOHNSON, LOUISE
Address: 1031 E 24TH ST
City-St-Zip: JACKSONVILLE, FL 32206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWN, MARY C
Address: 5744 CLEVELAND RD
City-St-Zip: JACKSONVILLE, FL 32209

Title: D (X) Change () Addition
Name: BROWN, ANTHONY
Address: 6710 COLLINS ROAD # 215
City-St-Zip: JACKSONVILLE, FL 32209

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

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

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: MARY C BROWN

P

02/26/2009

Electronic Signature of Signing Officer or Director

Date