## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Mar 09 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9400005871 (8)

NEW HOPE BAPTIST CHURCH OF DELTONA, INC.

	_				i
Principal Plac	e of Business	Mailing Address			ינספר צפנה ומספר בנופר ופורס וסופק הוופס הוופס הוופס הופס הופים וווסי סוף ופוווספי י
1256-B PROVIDENCE BLVD.		PO BOX 5642			3. Date Incorporated or Qualified
DELTONA FL 32725		DELTONA FL 32728 US			11/28/1994
Ì		US .			4. FEI Number Applied For
					<b>59-3295588</b> Not Applicable
	Place of Business	2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional
21 /890	PROVIDENCE BIVD	26			Fee Required
Sulte, Apt.	s#SeT	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	HONA	City & State			7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the current year Intangible
24 -	25 VOLUSIA	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
			8	1 Name	ne
BRADLEY, DOROTHALENE 1256-B PROVIDENCE BLVD.			8	2 Street	eet Address (P.O. Box Number is Not Acceptable)
	IA FL 32725		8	3	······································
			B	4 City	85 Zip Code
				1.	<b></b>
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	,,,	,			
	Signature, typed or printed name of registered agen			gent eignatu	ature required when reinstating) DATE
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D ADADIEV WILLIAM ID	L DECERE	1.1 TITLE		Change L Addition
NAME	BRADLEY, WILLIAM JR. 1921 LAVINA DR.		1.2 NAM		
STREET ADDRESS	DELAND FL		1	T ADDRESS	35
CITY-ST-ZIP Title	D DELAND FL	DELETE	1.4 CITY- 2.1 TITLE		Change Addition
NAME	SEWELL, ISAAC		2.2 NAME		
STREET ADDRESS	868 WHITEWOOD AVE.			T ADDRESS	22
CITY-ST-ZIP	DELTONA FL 32725		2. 4 CITY		~
TITLE	D	DELETE	3.1 TITLE		☐ Change
NAME .	REED, ISAAC		3.2 NAME		michael Williams Se.
STREET ADDRESS	7489 E. NORMANDY BLVD.		3.3 STREE	T ADDRESS	ss 2889 Cottneville
CITY-ST-ZIP	DELTONA FL 32725		3.4. CITY	ST-ZIP	Michael Williams Se. 2889 Cottageville Deltona, 42 32738
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	l		4. 2 NAM	E	
STREET ADDRESS			4.3 STREE	T ADDRESS	ss
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	t address	25
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	T ADDRESS	ss
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	

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:

2/23/93