

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000146

FILED
May 05, 2004
Secretary of State**Entity Name:** ELPIS OUTREACH MINISTRIES INC.**Current Principal Place of Business:**20954 S.W 85 PASSAGE
MIAMI, FL 33189 US**New Principal Place of Business:****Current Mailing Address:**20954 S.W 85 PASSAGE
MIAMI, FL 33189 US**New Mailing Address:****FEI Number:** 65-0549736**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HOPE, JOHN C SR.
20954 S.W. 85 PASSAGE
MIAMI, FL 33189**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:** D () Delete
Name: HOPE, JOHN C SR.
Address: 20954 S.W. 85 PASSAGE
City-St-Zip: MIAMI, FL 33189**Title:** D () Delete
Name: HOPE, MONA M
Address: 20954 SW 85 PASSAGE
City-St-Zip: MIAMI, FL 331893326**Title:** D () Delete
Name: HOPE, JOHN C JR.
Address: 16530 SW 299 ST
City-St-Zip: MIAMI, FL 33033**Title:** D () Delete
Name: HOPE, D. KEVIN
Address: 1317 MOHR LAKE DR
City-St-Zip: BRANDON, FL 33511**Title:** D () Delete
Name: HOPE, JENNIFER U
Address: 15325 SW 102 RD
City-St-Zip: MIAMI, FL 33157**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN C. HOPE

D

05/05/2004

Electronic Signature of Signing Officer or Director

Date