2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002987

Entity Name: NEW HOPE FIRST COMMUNITY CHURCH, INC.

Apr 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

500 GULFSTEAM BLVD 2929A S SEACREST BLVD BOYNTON BEACH, FL 33435 #101

DELRAY BEACH, FL 33483

New Mailing Address: Current Mailing Address:

500 GULFSTREAM BLVD 2929A S SEACREST BLVD #101 BOYNTON BEACH, FL 33435

DELRAY BEACH, FL 33483

FEI Number: 65-0675004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SCATORCHIA, ALBERT 5698 ASPEN RIDGE CIRCLE US DELRAY BEACH, FL 33484

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete DVP (X) Change () Addition GAGLIANO, ROBERT PAZDUR, ARMAND Name: Name:

6222 NW 23 ST Address: 6405 SAGEWOOD WAY Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: DELRAY, FL 33484

Title: () Delete Title: (X) Change () Addition LINGEN, CHARLES Name: KACOURUS, STEVE Name:

Address: 12492 PLEASANT GREEN WAY Address: PO BOX 1260

City-St-Zip: BOYNTON BEACH, FL 33432 City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete Title: DS (X) Change () Addition BRADLOW, TERRY BRADLOW, TERRY Name: Name:

14 RIPLEY WAY 14 RIPLEY WAY Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip:

BOYNTON BEACH, FL 33426

(X) Change () Addition Title: вм () Delete Title: DM

D'ANGELO, MARY ANN Name: PAZDUR, ARMAND Name: Address: 6405 SAGEWOOD WAY Address: 702 BURGUNDY O City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: DELRAY BEACH, FL 33484

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT WILLIAMS Μ 04/22/2007