

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003415

FILED
Apr 17, 2005
Secretary of State

Entity Name: HOPE NEW TESTAMENT CHURCH OF GOD INC.

Current Principal Place of Business:

6000 KIIMBERLY BLVD
NORTH LAUDERDALE, FL 33068 US

New Principal Place of Business:

6000 KIMBERLY BLVD
NORTH LAUDERDALE, FL 33068 US

Current Mailing Address:

6227 NW 53RD CIRCLE
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: 65-0710308 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOREMAN, LEONARD D REV.
6227 NW 53RD CIRCLE
CORAL SPRINGS, FL 33067 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: FOREMAN, LEONARD D
Address: 6227 NW 53RD CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: TAS () Delete
Name: ALLETTE, JOHN
Address: 835 E. PALM RUN DR
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: TC () Delete
Name: ALLETTE, GRACE ANN
Address: 835 PALM RUN DR.
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: DT () Delete
Name: CLARKE, DERRICK
Address: 5100 NW 47 AVE
City-St-Zip: COCONUT CREEK, FL 33442

Title: O () Delete
Name: FOREMAN, JENNIFER
Address: 6227 NW 53RD CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: SSD () Delete
Name: CLARKE, MARLENE
Address: 5100 N.W. 47 AVE
City-St-Zip: COCONUT CREEK, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TC (X) Change () Addition
Name: ALLETTE, GRACE ANNE
Address: 835 PALM RUN DR.
City-St-Zip: NORTH LAUDERDALE, FL 33068

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: GRACE ANNE ALLETTE

TC

04/17/2005

Electronic Signature of Signing Officer or Director

Date