

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003415

FILED
Apr 28, 2008
Secretary of State

Entity Name: HOPE NEW TESTAMENT CHURCH OF GOD INC.

Current Principal Place of Business:

6000 KIMBERLY BLVD
NORTH LAUDERDALE, FL 33068 US

New Principal Place of Business:

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 US

Title: TAS () Delete
Name: ALLETTE, JOHN
Address: 3911 NW 54 COURT
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: TC () Delete
Name: ALLETTE, GRACE ANNE
Address: 3911 NW 54 CT
City-St-Zip: COCONUT CREEK, FL 33073

Title: DT () Delete
Name: CLARKE, DERRICK
Address: 5100 NW 47 AVE
City-St-Zip: COCONUT CREEK, FL 33073 US

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

Title: SSD (X) Delete
Name: LAWRENCE, LUKE
Address: 5845 NW 54 CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33067 US

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 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: GRACE ALLETTE

TC

04/28/2008

Electronic Signature of Signing Officer or Director

Date