

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000005899

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Entity Name:** HOPE UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

HOPE UNITED METHODIST CHURCH  
2200 LITTLE RD  
NEW PORT RICHEY, FL 34655 US

**New Principal Place of Business:**

**Current Mailing Address:**

HOPE UNITED METHODIST CHURCH  
2200 LITTLE RD  
NEW PORT RICHEY, FL 34655 US

**New Mailing Address:**

**FEI Number:** 59-3418336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KELLY, SMITH PASTOR  
2200 LITTLE ROAD  
TRINITY, FL 34655 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: CHMN  
Name: KAVALA, CHRIS M  
Address: 3714 COVINGTON DRIVE  
City-St-Zip: HOLIDAY, FL 34691

Title: SCTY  
Name: SMITH, ALAN  
Address: 2200 LITTLE ROAD  
City-St-Zip: TRINITY, FL 34655

I hereby 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 all other like empowered.

SIGNATURE: CHRIS M KAVALA

CHMN

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date