

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006012

FILED
Apr 20, 2007
Secretary of State

Entity Name: NEW HOPE CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

249 S TAMiami TR
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

249 S TAMiami TR
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 65-0801666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMKINS, ANDREW J
249 S TAMiami TR
NOKOMIS, FL 34275 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: D () Delete
Name: SIMKINS, ANDREW
Address: 703 N PORTIA STREET
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: GIRARD, ELLERY
Address: 1507 ROBBINS RD
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: WOTHINGTON, DONALD
Address: 1011 DEVON TD
City-St-Zip: VENICE, FL 34293

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:

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: ANDREW J. SIMKINS

D

04/20/2007

Electronic Signature of Signing Officer or Director

Date