

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90041 016 ****61.25

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1. Entity Name
NEW HOPE CHRISTIAN CHURCH OF ARCADIA INC.



Principal Place of Business
**3877 HWY 70 NW
ARCADIA, FL 34266**

Mailing Address
**P O BOX 430
ARCADIA, FL 34265**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01202006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-3468283

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DUNCAN, DEAN
2988 SW WALLIS AVE
ARCADIA, FL 34266**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent:

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☐ Delete
NAME **DUNCAN, DEAN**
STREET ADDRESS **2988 SW WALLIS AVE**
CITY-ST-ZIP **ARCADIA, FL 34266**

TR ☐ Change ☒ Addition
NAME **PETE BAKER**
STREET ADDRESS **6837 CUBITUS AVENUE #513**
CITY-ST-ZIP **ARCADIA FL 34266**

S ☐ Delete
NAME **BAUER, PEGGY A**
STREET ADDRESS **1445 NE LEISURE AVENUE**
CITY-ST-ZIP **ARCADIA, FL 34266**

☐ Change ☐ Addition

TR ☐ Delete
NAME **CRABTREE, DEL**
STREET ADDRESS **218 N HERNANDO AVE**
CITY-ST-ZIP **ARCADIA, FL 34266**

☐ Change ☐ Addition

CTR ☐ Delete
NAME **DUNCAN, DEAN**
STREET ADDRESS **2988 SW WALLIS AVE**
CITY-ST-ZIP **ARCADIA, FL 34266**

☐ Change ☐ Addition

TR ☐ Delete
NAME **RUDD, ELMO**
STREET ADDRESS **6837 CUBITUS AVE # 502**
CITY-ST-ZIP **ARCADIA, FL 34266**

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Farrell D. Duncan* **FARRELL D. DUNCAN**

2/13/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #