NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000002115

Corporation Name

NEW HOPE CHURCH OF GOD, INC.

Principal Place of Business 910 PARSON AVE. SEFFNER FL 33584

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

11721 RHODINE RD. RIVERVIEW FL 33569

2a. Mailing Address

Suite, Apt. #, etc.

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90154 010 ****70.00



Applied For

3. Date incorporated or Qualifed

04/13/1998

59-3503822

4. FEI Number

22		21							444.44	
City & State		City & State			5. Certificate of Status Desired	== \$8.75 A Fee Re	dditional —— quired			
Zìp	Country	Zip	Cou	my		6. Election Campaign Financin	° 0	\$5.00	-,	
24				10		Trust Fund Contribution		Added to	o Fees	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
				81	Name					
JACKSON, DOROTHY LEE				82	Street Address (P.O. Box Number is Not Acceptable)					
11721 RHODINE RD.										
RIVERVIEW FL 33569				83						
				84	City		<u> </u>	85 Zip C	ode	
_				Щ			<u></u>			
11. Pursuant	to the provisions of Sections 617.0502 and agent, or both, in the State of	ind 617.1508, Florida Sta Florida, Such change wa:	itules, the al s authorized	bove by t	-named corpo the comonation	oration submits this statement for the n's board of directors, I hereby acc	ne purpose of cept the appo	r changing its i intment as reg	registered pistered	
agent, I a	ım famillar with, and accept the obligatio	ns of, Section 617.0503, I	Florida Stati	nes		•	,			
SIGNATURE										
	Signature, typed or printed name of registered agent at OFFICERS AND		TE: Registered	Agent	signature required	when reinstating) ADDITIONS/CHANGES TO C	DATE OFFICERS A	ND DIRECTOR	RS IN 12	
TITLE	OFFICERS AND	DELETE	1,1 70	7 E \		700711313313313		Change	Addition	
NAME	-PASTOR DOROTHY L.		1.2 NA		- 1			- •	_	
STREET ADDRESS	11721 Rhodine RD			1.9 STREET ADDRESS						
CITY-ST-ZIP	Riverview, Florida 33569			1.4 CITY-ST-ZIP			•			
TITLE	Deaconess Lillie J. Robinsoffer			21 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME	D6010pSs82St	. Roothson	2.2 NA	ME						
STREET ADDRESS		9	2.3 87	REET	ADDRESS					
CITY-ST-ZIP	rampa, riorida 3301	,	2.4C	TY-ST	-250				<u></u>	
TITLE	Deaconess Maeola V	Utileon DELETE	3.1 17	Œ				Change	☐ Addition	
NAME			32 NA	ME					·	
STREET ADDRESS	2621 28th Ave.		3.3 57	REET	ADDRES8		e, ~ =			
CITY-81-ZP	Tampa,Florida 3360		3.4. CI		-ZIP			Chance	Add ition	
TITLE	Secretary Lealer M		4.1 111		(Change		
NAME	2008 E. Mulberry D		4.2N	_						
STREET ADDRESS	Tampa ,Florida 336	04			ADDRESS					
CITY ST-ZIP		[] DELETE	4.4 CT		<u>a </u>			☐ Change	Addition	
NAME		اعتواد ت	5.2 NA	_						
					ADDRESS !		•			
STREET ADDRESS CITY-ST-ZIP			5.4 QT		I	•		• •		
TITLE		☐ DELETE	6.1707		- - -			Change	Addition	
NAME :	·		5.2 NA	ME				-		
STREET ADDRESS			6.3 ST	REET/	ADDRESS					
CTY-ST-ZIP			8.4 CIT	Y-ST-	.ZP	•			_	
W11-01-4F						netion 110 07/2\/ii\ Elected Statutos		210 at . a ab . 1 -		

I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, i further certify that the informatio indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an activess, with all other like ampowered.

SIGNATURE

Feb 1-1999 - 813-677-4