2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2008
Secretary of State

DOCUMENT# N98000003251

Entity Name: GREATER NEW HOPE MISSIONARY BAPTIST CHURCH OF PAHOKEE, INC.

Current Principal Place of Business:

100 EAST DR MARTIN L KING JR BLVD
PAHOKEE, FL 33476

New Principal Place of Business:

Current Mailing Address:

230 WEST DR MARTIN L KING JR BLVD
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 65-0675087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JACKSON, MARY E
230 WEST DR MARTIN LUTHER KING JR BLVD
PAHOKEE, FL 33476 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: C ( ) Delete
Name: JACKSON, WILLIE A
Address: 1749 EAST MAIN STREET
City-St-Zip: PAHOKEE, FL 33476

Title: D ( ) Delete
Name: KILLINGSWORTH, WILLIE J
Address: 323 BANYAN AVE
City-St-Zip: PAHOKEE, FL 33476

Title: VC ( ) Delete
Name: BOSTIC, ALBERT
Address: 264 NW 9TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: S ( ) Delete
Name: JACKSON, MARY E
Address: 230 WEST DR MARTIN L KING JR BLVD
City-St-Zip: PAHOKEE, FL 33476

Title: TS ( ) Delete
Name: FLETCHER, LUCILLE B
Address: 849 SOUTHEAST 1ST ST
City-St-Zip: BELLE GLADE, FL 33430

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BOLDIN, ULYSSES L
Address: 498 EAST 3RD STREET
City-St-Zip: PAHOKEE, FL 33476 US

Title: D (X) Change ( ) Addition
Name: KILLINGSWORTH, WILLIE J
Address: 323 BANYAN AVE
City-St-Zip: PAHOKEE, FL 33476 US

Title: VC (X) Change ( ) Addition
Name: BOSTIC, ALBERT
Address: 264 NW 9TH STREET
City-St-Zip: BELLE GLADE, FL 33430 US

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: MARY E. JACKSON MRS. 07/09/2008
Electronic Signature of Signing Officer or Director — Date