

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90212 011 \*\*\*\*61.25

<b>DOCUMENT # N98000003265</b> 1. Entity Name <b>HOPE BAPTIST CHURCH INC.</b>					
Principal Place of Business <b>2440 FORTUNE RD KISSIMMEE, FL 34744</b>			Mailing Address <b>2460 FORTUNE ROAD KISSIMMEE, FL 34744</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04222006 Chg-NP CR2E037 (11/05)	
4. FEI Number <b>59-3511957</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SMITH, J. MICHAEL 2440 FORTUNE RD KISSIMMEE, FL 34744</b>			Name <b>MARVIN LANE</b> Street Address (P.O. Box Number is Not Acceptable) <b>2460 FORTUNE ROAD</b> City <b>KISSIMMEE</b> <b>FL</b> Zip Code <b>34744</b>		
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 <u><i>ME Lane</i></u> <b>MARVIN LANE PASTOR</b> <b>4-21-06</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BLAKE, LINDLEY 4207 GOLD RUSH LN SAINT CLOUD, FL 34772</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D FRANKS, DAVID 1177 JADE EAST LN KISSIMMEE, FL 34744</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D LANE, MARVIN 2306 ELDORADO CT SAINT CLOUD, FL 34771</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P LANE, MARVIN 2460 FORTUNE ROAD KISSIMMEE, FL 34744</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MILTON, ESTON LEROY 3250 BOGGY TERRACE DR KISSIMMEE, FL 34744</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HIATT, NEAL 3101 GREAT OAKS BLVD. KISSIMMEE, FL 34744</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P SMITH, J. MICHAEL 2440 FORTUNE RD KISSIMMEE, FL 34744</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HIATT, TYLER 13137 OULTON CIRCLE ORLANDO, FL 32832</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T MCCLURE, GERALD L 2440 FORTUNE RD KISSIMMEE, FL 34744</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.					
<b>SIGNATURE: <u><i>Lindley Blake</i></u> <b>LINDLEY BLAKE</b> <b>4-21-06</b> <b>407-870-0070</b></b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					