

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000380

**FILED**  
**Feb 16, 2017**  
**Secretary of State**  
**CC3305531351**

**Entity Name:** NEW HOPE COMMUNITY CHURCH OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

6031 FAIRGREEN ROAD  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

6031 FAIRGREEN ROAD  
WEST PALM BEACH, FL 33417

**FEI Number: 20-8236768**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ARROYO, CAROLYN L  
4095 PALM BAY CIR #C  
WEST PALM BEACH, FL 33406 US

*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

**Officer/Director Detail :**

Title P  
Name CAVANAUGH, ARTHUR J  
Address 6031 FAIRGREEN ROAD  
City-State-Zip: WEST PALM BEACH FL 33417

Title S  
Name SULLIVAN, SUE  
Address 6031 FAIRGREEN ROAD  
City-State-Zip: WEST PALM BEACH FL 33417

Title T  
Name ARROYO, CAROLYN L  
Address 4095 PALM BAY CIR #C  
City-State-Zip: WEST PALM BEACH FL 33406

*I hereby 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 all other like empowered.*

SIGNATURE: CAROLYN ARROYO

TREASURER

02/16/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date