


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007 08:00 AM
Secretary of State

DOCUMENT # 729135	
1. Entity Name NEW BEGINNINGS, INC.	

Principal Place of Business 162 FAIRWAY HILLS P.O. BOX 228 WAYNESVILLE, NC 28786 US	Mailing Address 162 FAIRWAY HILLS P.O. BOX 228 WAYNESVILLE, NC 28786 US
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DO NOT WRITE IN THIS SPACE



03182007 No Chg-NP CR2E037 (4/06)

4. FEI Number 23-7105659	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**TYLER, SARAH
301 E CAROLINA ST
SUITE 704
TALLAHASSEE, FL 32301**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PURVIS, SUSAN H. 162 FAIRWAY HILLS WAYNESVILLE, NC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PURVIS, NANCY P 162 FAIRWAY HILLS WAYNESVILLE, NC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PURVIS, THOMAS G. 162 FAIRWAY HILLS WAYNESVILLE, NC
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04/02/07-80033-014 70.00

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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: Thomas G Purvis Thomas G. Purvis Vice President 3/19/07 828-456-3628
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #