

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762154

FILED  
May 22, 2006  
Secretary of State

**Entity Name:** NEW DAWN MINISTRIES, INC.

**Current Principal Place of Business:**

11030 WILES RD  
CORAL SPRINGS, FL 33076 US

**New Principal Place of Business:**

**Current Mailing Address:**

6761 NW 22ND CT  
MARGATE, FL 33063 US

**New Mailing Address:**

**FEI Number:** 59-2165565 **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:**

CUTTER, RANDAL  
6761 NW 22ND CT  
MARGATE, FL 33063 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: PD ( ) Delete  
Name: CUTTER, RANDAL  
Address: 6761 NW 22ND CT  
City-St-Zip: MARGATE, FL

Title: VD ( ) Delete  
Name: AGATA, DAVID  
Address: 9131 NW 80TH AVE  
City-St-Zip: MARGATE, FL 33063

Title: STD ( ) Delete  
Name: RENTLER, MIKE  
Address: 5032 NW 3 RD TERR  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: RANDAL L. CUTTER

PD

05/22/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date