2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2001 8:00 am
Secretary of State
01-31-2001 90096 032 ****70.00

DOCUMENT # N00000003971

1. Entity Name

NEW BEGINNINGS SANCTUARY OF PRAISE CHURCH, INC.

Principal Place of Business	Mailing Address
100 NW BEAL PKWY FT. WALTON BEACH FL 32547	100 NW BEAL PKWY FT. WALTON BEACH FL 32547

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	POST OFFICE BOX 714 Suite, Apt. #, etc.
City & State	City & State: SHALIMAR FL.
Zip / Country	Zip: 32579 Country: U.S.A.

4. FEI Number: 59-3649768 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOODWIN, ALEX
100 NW BEAL PKWY
FT. WALTON BEACH FL 32547

7. Name and Address of New Registered Agent

Name: GOODWIN, ALEX
Street Address (P.O. Box Number is Not Acceptable): 79 SCHOONER LANE
City: SHALIMAR FL Zip Code: 32579

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.

SIGNATURE: [signature] 23 JANUARY 2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT PASTOR Alex Goodwin 79 Schooner Lane Shalimar Fl. 32579	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT RICHARD PARKER JR. 428 BRISTOL COVE Road MARY ESTER Fl. 32569	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary TYRONE B. CRAWFORD 1922 HEARTLAND DRIVE Fort Walton Beach Fl. 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER KENNETH R. PERKINS 643 VIRGINIA OAK COURT FortWalton Beach Fl. 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [signature] ALEX GOODWIN, PASTOR 23 JANUARY 2001 (850)651-5633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #