

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000004741

**FILED**  
**Jan 25, 2016**  
**Secretary of State**  
**CC6007795080**

**Entity Name:** NEW BEGINNING FAMILY FELLOWSHIP, INC.

**Current Principal Place of Business:**

210 S. PINELLAS AVE.  
SUITE 195  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

1504 RIVERSIDE DR  
TARPON SPRINGS, FL 34689 US

**FEI Number: 59-3737414**

**Certificate of Status Desired: No**

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

HOULLIS, MARY L  
1504 RIVERSIDE DR  
TARPON SPRINGS, FL 34689 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 DP  
Name HOULLIS, MARY L  
Address 1504 RIVERSIDE DR  
City-State-Zip: TARPON SPRINGS FL 34689

Title DT  
Name HADESTY, MARK  
Address 2718 OAK BEND COURT  
City-State-Zip: NEW PORT RICHEY FL 34655

Title DS  
Name HADESTY, PAMELA  
Address 2718 OAK BEND COURT  
City-State-Zip: HOLIDAY FL 34655

*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: MARY LOU HOULLIS**

**PRESIDENT**

**01/25/2016**

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

\_\_\_\_\_  
Date