

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000005556

**Entity Name:** NEW BEGINNINGS FOR SOBER LIVING, INC.**Current Principal Place of Business:**1817 NW 14TH AVENUE  
FORT LAUDERDALE, FL 33311**Current Mailing Address:**1817 NW 14TH AVENUE  
FORT LAUDERDALE, FL 33311**FEI Number:** 84-3717275**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KING, EBONY  
1817 NW 14TH AVENUE  
FORT LAUDERDALE, FL 33311 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	KING, EBONY
Address	1817 NW 14TH AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	S
Name	COKLEY-HODGE, DORA
Address	3730 NW 9TH STREET
City-State-Zip:	LAUDERHILL FL 33313

Title	OFFICER
Name	ARMALIN, VADA
Address	222 E DIXIE COURT
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	OFFICER
Name	JOHNSON, MARY
Address	171 NE 24TH STREET
City-State-Zip:	POMPANO BEACH FL 33064

Title	VP
Name	PARKER, CHARLIE III
Address	6601 WOODS ISLAND CIRCLE, #207
City-State-Zip:	PORT ST. LUCIE FL 34952

Title	T
Name	WILLIAMS, ADDIE
Address	931 NW 11TH COURT
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	C
Name	MASH, DEMOND
Address	354 NW 30TH TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33311

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: EBONY KING****PRESIDENT****04/30/2023**

Electronic Signature of Signing Officer/Director Detail

Date