

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000011435

Entity Name: NEW BEGINNINGS BAPTIST CHURCH INC

Current Principal Place of Business:

5940 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5940 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 34652 US

FEI Number: 86-1173156

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DOUGLAS, JOSEPH A
9211 PEONY ST
NEW PORT RICHEY, FL 34654 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 DOUGLAS, JOE A
Address 9211 PEONY ST
City-State-Zip: NEW PORT RICHEY FL 34654

Title T
Name WILSON, SHIRLEY
Address 12390 LACY DR
City-State-Zip: NEW PORT RICHEY FL 34654

Title SEC
Name DICKEY, MICHELLE
Address 5503 WATERS EDGE DR
City-State-Zip: NEW PORT RICHEY FL 34653

Title PASTOR
Name DOUGLAS, JOSEPH A
Address 5940 MASSACHUSETTS AVE
City-State-Zip: NEW PORT RICHEY FL 34654

Title PRINCIPLE
Name KESTERMANN, TAMMIE
Address 5940 MASSACHUSETTS AVE
City-State-Zip: NEW PORT RICHEY FL 34652

Title TREASURER
Name TOBECK, LORETTA
Address 5940 MASSACHUSETTS AVE
City-State-Zip: NEW PORT RICHEY FL 34652

Title BOARD MEMBER
Name PEAK, RICK
Address 5940 MASSACHUSETTS AVE
City-State-Zip: NEW PORT RICHEY FL 34652

Title CHURCH TREASURER
Name HOLIHAN, EILEEN
Address 5940 MASSACHUSETTS AVE
City-State-Zip: NEW PORT RICHEY FL 34652

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: JOSEPH DOUGLAS

PASTOR

02/13/2024

Electronic Signature of Signing Officer/Director Detail

Date