

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

DOCUMENT# N22000007354

**Entity Name:** NEW BEGINNINGS BAPTIST ACADEMY INC**Current Principal Place of Business:**5940 MASSACHUSETTS AVENUE  
NEW PORT RICHEY,, FL 34652**Current Mailing Address:**5940 MASSACHUSETTS AVE  
NEW PORT RICHEY, FL 34652 UN**FEI Number: 88-3021090****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**KESTERMANN, TAMMY  
4950 MASSACHUSETTS AVENUE  
NEW PORT RICHEY,, FL 34652 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	ADMI
Name	KESTERMANN, TAMMY
Address	5940 MASSACHUSETTS AVE
City-State-Zip:	NEW PORT RICHEY FL 34652

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

Title	CHURCH TREASURER
Name	WILSON, SHIRLEY
Address	5940 MASSACHUSETTS AVENUE
City-State-Zip:	NEW PORT RICHEY, FL 34652

Title	SEC
Name	OUTLAW, JENNIFER
Address	5940 MASSACHUSETTS AVE
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	PASTOR
Name	DOUGLAS, JOSEPH
Address	5940 MASSACHUSETTS AVENUE
City-State-Zip:	NEW PORT RICHEY, FL 34652

Title	CHURCH SEC.
Name	DICKEY, MICHELLE
Address	5940 MASSACHUSETTS AVENUE
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: TAMMY KESTERMANN****ADMIN/PRINCIPAL****01/26/2023**

Electronic Signature of Signing Officer/Director Detail

Date