

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712742

FILED
Apr 13, 2009
Secretary of State

Entity Name: NEW HORIZONS MINISTRIES, INCORPORATED

Current Principal Place of Business:

3116 HAYES STREET
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

3116 HAYES STREET
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 23-7024818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAVLIN, WALTER
3116 HAYES STREET
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRAVLIN, VIRGINIA L.
Address: 3116 HAYES STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: STD () Delete
Name: GRAVLIN, WALTER
Address: 3116 HAYES STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: URIBE, DAVID
Address: 13001 SW 17 COURT
City-St-Zip: MIRAMAR, FL 33027

Title: VPD () Delete
Name: CAMARGO, HEATHER
Address: 3182 WILSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: GRESHAM, WAYNE
Address: 10040 SW 34 ST
City-St-Zip: MIAMI, FL 33165

Title: D () Delete
Name: YUEN, DAVID
Address: 1369 NW 123 AVE
City-St-Zip: PEMBROKE PINES, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WALTER GRAVLIN

STD

04/13/2009

Electronic Signature of Signing Officer or Director

Date