## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

### **DOCUMENT # 764230**

1. Corporation Name

#### NEW BEGINNING COMMUNITY CHURCH INC.

Principa	al Place	of Bu	siness
	13TH STI ERSBUR(		

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

2701 - 13TH STREET, SOUTH ST PETERSBURG FL 33705

# FILED Jan 27, 1999 8:00am Secretary of State

01-27-1999 90006 019 \*\*\*\*70.00



3. Date incorporated or Qualifed

07/21/1982

59-2239477

4. FEI Number

	28			3. Certificate of Status Desired	Fee Required		
Zip Country	Zip			6. Election Campaign Financing	<b>\$5.00</b> May B	3е	
4 25	29	30		Trust Fund Contribution	Added to Fees	s	
9. Name and Address of C	urrent Registered Agent			10. Name and Address of New R	<del></del>		
	· % • 5		81 Name				
BIANDUDI, CELESTIN COMMON COMM			82 Street Address (P.O. Box Number is Not Acceptable)				
			83				
0, 12,2,000,00			84 City		85 Zip Code		
AND A STATE OF THE AREA OF THE	, ,			e a company of the second of t	FL. [3. ]	1555	
11. Pursuant to the provisions of Sections 61 office or registered agent, or both, in the sagent. I am familiar with, and accept the control of the sagent.	State of Florida. Such char	ige was authorize	d by the corporatio	n's board of directors. I hereby accept	ourpose of changing its registe t the appointment as registere	9CI 64	
SIGNATURE Signature, typed or printed name of register	ed agent and title if applicable.	(NOTE: Registered	d Agent signature required	when reinstating)	DATE	_	
	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN	12	
TITLE CD		DELETE 1.1 TI	TLE .	1 Aug 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Change ☐ /	Addition	
NAME   BIANDUDI, CELECTIN		1.2 N	AME				
STREET ADDRESS 2701 13TH ST. S.		1.3 \$	TREET ADORESS	1.			
CITY-ST-ZIP ST PETERSBURG FL 3370	5 .	1.4 0	ITY-ST-ZIP				
TITLE D .		DELETE 2.1 TO	me		☐ Change ☐ /	Addition	
NAME PARRIE, LEE WHATLEY		2.2 N	AME	·			
STREET ADDRESS 1730 45TH ST S		2.3 S	TREET ADDRESS				
CITY-ST-ZIP ST PETERSBURG FL	24.3	2.40	CITY-ST-ZIP		* `		
TITLE SD		DELETE 3.1 T	me ·		Change D	Addition	
NAME AND ADDRESS BRYANT, RUTH, JETTIE	11 Aug 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3.2 N	IAME :				
STREET ADDRESS 1425 27TH AVE., S.	and the second	3.3 S	TREET ADDRESS				
cmy strzie ST: PETERSBURG FL		3.4. 0	CITY-ST-ZIP				
TITLE		DELETE 4.1 T	MLE		☐ Change ☐ /	Addition	
NAME - 10 to 1 PRI 1.5 C T.		4.21	NAME	Secretary of the second	en de Anno Pano Perende de Dec	119	
STREET ADDRESS	•	4.3 S	TREET ADDRESS		Section 2		
CITY-ST-ZIP		4.4 C	TY-ST-ZIP		<u>(1 ) [                                  </u>	14	
TITLE		DELETE 5.1 T	ITLE		☐ Change ☐ A	Addition	
NAME	•	5.2 N	AME .				
STREET ADDRESS		5.3 S	TREET ADDRESS				
CITY-ST-ZIP		5.4 C	ITY-ST-ZIP				
TITLE SOUTH FOR THE STATE OF TH		DELETE 6.1 T	ITLE		Change /	Addition	
NAME STOLENIS		6.2 N	AME	•	,		
STREET ADDRESS	<i>:</i>	6.3 S	TREET ADDRESS				
CITY-ST-ZIP			ITY-ST-ZIP				
14. I hereby certify that the information suppli	ed with this filing does not	qualify for the exe	mption stated in S	ection 119.07(3)(i), Florida Statutes. I	further certify that the informa	ation	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE

CHATLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-99 727-894-7537

Date Dayline Phone #

KZEU3/ (11/98)

Applied For

\$8.75 Additional

Not Applicable