


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000001220	
1. Entity Name NEW NATIONS MINISTRY INC.	

Principal Place of Business 903 JONES AVENUE MARION, SC 29571	Mailing Address P O BOX 731 MARION, SC 29571
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DO NOT WRITE IN THIS SPACE

FILED
07 MAY 14 AM 8:25

STATE OF FLORIDA
TALLAHASSEE, FLORIDA



02052007 No Chg-NP CR2E037 (4/06)

4. FEI Number 56-2307766	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

FAIRLEY, DON BISHOP
839 CYPRESS STREET
DAYTONA BEACH, FL 32114

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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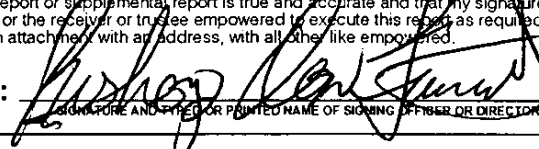
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD FAIRLEY, DON E BISHOP 903 JONES AVENUE MARION, SC 29571
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOODY, NANCY 1394 TANTABE ROAD MURRELLS INLET, SC 29576
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WASHINGTON, TANA 832 W. VIRGINIA ROAD GEORGETOWN, SC 29440
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CROSS, RUBY 303 WATSON STREET MARION, SC 29571
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOODY, NANCY 1394 TUNTABE ROAD MURRELLS INLET, SC 29576
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WASSTON, ANTHONY 832 W. VIRGINIA ROAD GEORGETOWN, SC 29440

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05/23/07--01019--001 **71.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  9/27/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR