2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# F09000004251

Entity Name: NEW BEGINNINGS HEALING CENTER, INC.

Current Principal Place of Business:

1546 CHERRY BLOSSOM TERRACE
LAKE MARY, FL 32746

New Principal Place of Business:

1546 CHERRY BLOSSOM TERRACE
0
LAKE MARY, FL 32746 UN

Current Mailing Address:

P. O. BOX 588569
ORLANDO, FL 32856

New Mailing Address:

FEI Number: 34-1355965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, JONATHAN D
1546 CHERRY BLOSSOM TERRACE
LAKE MARY, FL 32746 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: P
Name: MILLER, JONATHAN D
Address: PO BOX 568569
City-St-Zip: ORLANDO, FL 32856

Title: V
Name: MILLER, R J
Address: PO BOX 568569
City-St-Zip: ORLANDO, FL 32856

Title: S
Name: ARTHUR, MARK M
Address: PO BOX 568569
City-St-Zip: ORLANDO, FL 32856

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: JONATHAN D. MILLER P 01/05/2012

Electronic Signature of Signing Officer or Director Date