

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90096 034 ****61.25

DOCUMENT # F96000003334

1. Entity Name
NEW CREATION EVANGELISM, INC.



Principal Place of Business
**3025 CLEVELAND ST
CLEARWATER, FL 33759 US**

Mailing Address
**10 MEADOW LARK LANE
CLEARWATER, FL 33759 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02242006 Chg-NP CR2E037 (11/05)

4. FEI Number
63-0985796

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HUDGINS, THOMAS E
10 MEADOW LARK LANE
CLEARWATER, FL 33759**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE C ☐ Delete
NAME HUDGINS, THOMAS E
STREET ADDRESS 10 MEADOW LARK LANE
CITY-ST-ZIP CLEARWATER, FL 33759

TITLE D ☒ Delete
NAME BAKER, CORINNE
STREET ADDRESS 1825 JESSICA RD
CITY-ST-ZIP CLEARWATER, FL 33765

TITLE D ☒ Delete
NAME RAY, JIM
STREET ADDRESS 1735 ASHTON ABBEY RD
CITY-ST-ZIP CLEARWATER, FL 33755

TITLE ☐ Delete
NAME HOLLOWAY, MARK
STREET ADDRESS 219 HIGHLAND WOODS DR
CITY-ST-ZIP SAFETY HARBOR, FL 34695

TITLE ☐ Delete
NAME James Slingo
STREET ADDRESS 700 Island Way #602
CITY-ST-ZIP Clearwater FL 33767

TITLE ☐ Delete
NAME Aaron Taylor
STREET ADDRESS 7508 Chelton Ct.
CITY-ST-ZIP New Port Richey, FL 34655

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Dean Anderson
STREET ADDRESS 700 Island Way #702
CITY-ST-ZIP Clearwater, FL 33767

TITLE D ☐ Change ☒ Addition
NAME Marianne Joyner
STREET ADDRESS 2506 Splitwood Way
CITY-ST-ZIP Clearwater, FL 33761

TITLE D ☐ Change ☒ Addition
NAME Floyd Miller
STREET ADDRESS 414 Mariva Ave.
CITY-ST-ZIP Clearwater, FL 33755

TITLE D ☐ Change ☒ Addition
NAME Russell Bieber
STREET ADDRESS 4625 E Bay Dr #305
CITY-ST-ZIP Clearwater, FL 33764

TITLE ☐ Change ☒ Addition
NAME Kathie Rice
STREET ADDRESS 2417 Hillcreek Circle E.
CITY-ST-ZIP Clearwater, FL 33759

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Thomas E. Hudgins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/06

Date

727-797-8180

Daytime Phone #