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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # **J37351**

(0)

Corporation Name

SIGNATURE;

NEW BEGINNINGS IN CHRIST, INC.

11211 0						
Principal Place of Business Mailing Address				- I TROCKIO ECOR CINE MODEL INCR. DECIDI	1191 Q1011 Q1011 P1011 B1011 B1	an diğir işti
7078 BERACA BOCA RATON US	= -	% BERNARD T MOYLE 1 Financial PLZ. Ste 1 Ft Lauderdale FL 333:				
00		US		3. Date incorporated or Qualified 09/29/1986	3a. Date of Last Report 05/01/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21			racasa Way	59-2735802		ot Applicable
Suite, Apt. #	, etc	Suite, Apt. #, etc.	/	5. Certificate of Status Desired	\$8.75 A	equired
City & State		28 B) Ca Rate	on, FL	Election Campaign Financing Trust Fund Contribution	□ \$5.00 Added t	· 1
Zip	Country	Zip 2 (12 2	Country	8. This corporation has liability for it		99.032,
24	25		30 <i>Q</i> , > ,	Florida Statutes Yes		
	9. Name and Address of Curren	it Hegistered Agent	B1 Name	10. Name and Address of New R	30/8/6/60 Wildelin	
CD1771 E	, Laura j			Trizzle, Law	α J .	
	S.W. 61ST AVE.		82 Street Addre	ess (P.O. Box Number is Not Acceptable 2200	* Ave]
SUITE 1602			83	000000		
	ATON FL 33428		24 07 0		les Zio (Code
			84 City	oca Katon	FL 85 35 3	3928 I
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named corpora	ation submits this statement for the pur	pose of changing its reg	gistered office
or registere familiar with	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	da. Such change was authorized ion 697.9305, Florida Statutes.	by the corporation's boar	d of directors. I hereby accept the appo	iritinent as registered a	yon. ram
SIGNATURE Z	MIII a (X	TXILLAND	Laura) (rrizzle sec. Hreas	4/22	196_
Ciartinone	Sterature, tyrisd or printed name of legistered sign		Registered Agent signature required	when reinstating)	DATE /	20,0110
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF		S IN 12
TITLE	GRIZZLE, WAYNE		1.1 IIILE 1.2 NAME		□ crange	
NAME	23300 S.W. 61ST AVE.		1.3 STREET ADDRESS			
STREET ADDRESS CITY - ST - ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP			-
TITLE	VD	DELETE.	2.1 TITLE		Change	Addition
NAME	GRIZZLE, LEO		2.2 NAME			
STREET ADDRESS	18863 SCHOONER DR.		2.3 STREET ADDRESS			
CITY-SY-ZIP	BOCA RATON FL		2 4 CITY - ST - ZIP			
TITLE	TSD	☐ DELETE	3. 1 TITLE		Change	☐ Addition
NAME	GRIZZLE, LAURA		3.2 NAME			
STREET ADDRESS	23300 S.W. 61ST AVE.		3.3. STREET ADDRESS			
CITY - ST - ZIP	BOCA RATON FL	☐ DELETE.	3.4 CITY-ST-ZIP		☐ Change	Addition
TITLE			4.1 TITLE		☐ Grange	
NAME			4.2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS			4.4 CITY-ST-ZIP			
CITY - ST - ZIP TITLE		DELETE.	5 1 TITLE		Change	☐ Addition
NAME			5.2 NAME		-	
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6. 1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
				or the exemption stated in Section 119, the and that my signature shall have the		
oath; that appears in	I am an officer or director of the corp Block 12 or Block 13 if changed, or	oration or the receiver or trustee on an attachment with an addres	empowered to execute thiss.	s report as required by Chapter 607, FI	orida Statutes; and that	. my name

potros Laura J. Grizzle 4/