## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L92985

FILED Jan 04, 2008 Secretary of State

Entity Name: NEW BEGINNINGS CHRISTIAN DAY CARE, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	ANUT STRET FL 32091 U	JS		
Current N	lailing Addres	ss:	New Mailing Addres	s:
	TH WALNUT S FL 32091	TREET		
El Number	: 59-3030489	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	current Registered Agent:	Name and Address of	of New Registered Agent:
	TH WALNUT S			
JIANNE,	FL 32091 L	JS		
The above			ourpose of changing its registere	ed office or registered agent, or both,
The above	e named entity : e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
The above n the Stat	e named entity : e of Florida. RE:			ed office or registered agent, or both,  Date
The above n the Stat SIGNATU	e named entity : e of Florida. RE:Electror	submits this statement for the p		
The above n the Stat BIGNATU	e named entity : e of Florida. RE:Electror	submits this statement for the particles of Registered Age of Trust Fund Contribution ( ).	ent	
The above n the Stat BIGNATU	e named entity : e of Florida.  RE: Electror  mpaign Financing  S AND DIREC	submits this statement for the particle Signature of Registered Age Trust Fund Contribution ( ).  TORS: Delete S 32	ent	Date
The above n the State SIGNATU  Election Ca  DFFICER  Title:  Jame:  Address:	e named entity : e of Florida.  RE: Electror  mpaign Financing  S AND DIREC  P ( ) EULA, NICHOL NE 219 ST. 12 LAWTEY, FL 3	submits this statement for the partic Signature of Registered Age of Trust Fund Contribution ( ).  TORS: Delete S 32 2058	ADDITIONS/CHANG Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EULA NICHOLS DIRE 01/04/2008