

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90488 013 ****61.25

DOCUMENT # N00000002569

1. Entity Name

NEW LIFE BEGINNINGS, INC.



Principal Place of Business

**1424 W. CANAL ST. SOUTH
BELLE GLADE FL 33430**

Mailing Address

**1424 W. CANAL ST. SOUTH
BELLE GLADE FL 33430**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1005598**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PETTRY, JOHN
1424 W. CANAL ST. SOUTH
BELLE GLADE FL 33430**

7. Name and Address of New Registered Agent

Name

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

420 S E 3rd Avenue

City

South Bay

FL

Zip Code

33493

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-13-03

FILE NOW: FEE IS \$61.25

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 **PD**
NAME **PETTRY, JOHN**
STREET ADDRESS **420 SE 3RD AVE.**
CITY-ST-ZIP **SOUTH BAY FL 33493**
☒ Delete **Deceased**

TITLE **VTD**
NAME **CARDIN, DEBORAH**
STREET ADDRESS **669 SE SECOND ST**
CITY-ST-ZIP **BELLE GLADE FL 33430**
☐ Delete

TITLE **D**
NAME **SUTTERFIELD, LILLIAN**
STREET ADDRESS **218 NW 2ND AVE**
CITY-ST-ZIP **SOUTH BAY FL 33493**
☐ Delete

TITLE **D**
NAME **ADAMS, PATRICIA**
STREET ADDRESS **6145 NE 72ND CIRCLE WEST**
CITY-ST-ZIP **OKEECHOBEE FL 34972**
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Bertha Pettry Sec. D**
NAME **420 SE 3rd Ave**
STREET ADDRESS **South Bay FL 33493**
CITY-ST-ZIP
☐ Change ☒ Addition

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

TITLE **P. D.**
NAME **Sutterfield, Lillian**
STREET ADDRESS **415 S E 3rd Ave**
CITY-ST-ZIP **South Bay, FL 33493**
☒ Change ☐ Addition

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **Bertha Pettry**
Signature, typed or printed name of registered agent and title if applicable.

3-13-03 561-996-3289

CR2E037 (10/02)