

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003109

FILED
Apr 24, 2006
Secretary of State

Entity Name: NEW WINE MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

425 S VOLUSIA AVE
SUITE E
ORANGE CITY, FL 32763

New Principal Place of Business:

1427 S VOLUSIA AVE
ORANGE CITY, FL 32763

Current Mailing Address:

709 N LEAVITT AVE
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 59-3661663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELLER, WAYNE A
709 N LEAVITT AVE
ORANGE CITY, FL 32763 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: PD () Delete
Name: NELLER, WAYNE A
Address: 709 N LEAVITT AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: LANE, HAMPTON
Address: 1048 E. LANSDOWNE AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: SYNDER, BERRY
Address: 771 HELEN AVE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: CLARK, ELIZABETH
Address: 188 SKYLAKE
City-St-Zip: SAUTEE, GA 30571

Title: D () Delete
Name: PORADO, MARK
Address: 5408 HWY 115 EAST
City-St-Zip: CLEVELAND, GA 30528

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: TURNER, DWAYNE
Address: 1742 HELEN HWY
City-St-Zip: CLEVELAND, GA 30528

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE A. NELLER

PD

04/24/2006

Electronic Signature of Signing Officer or Director

Date