# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 24, 2002 8:00 AM**
**Secretary of State**

DOCUMENT# N01000002312

**Entity Name:** SANCTUARY - A NEW BEGINNING, INC.

**Current Principal Place of Business:**

8805 SORREL WAY
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

8805 SORREL WAY
CLERMONT, FL 34711

**New Mailing Address:**

P.O. BOX 634
GROVELAND, FL 34736

**FEI Number: 59-3707871** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CRABTREE, JANIS L
8805 SORREL WAY
CLERMONT, FL 34711 US

**Name and Address of New Registered Agent:**

CRABTREE, JANIS L
P.O. BOX 634
GROVELAND, FL 34736 US

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: JANIS L. CRABTREE 05/24/2002
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete
Name: BROWING, JOHN E
Address: 8805 SORREL WAY
City-St-Zip: CLERMONT, FL 34711

Title: DVT ( ) Delete
Name: CRABTREE, JANIS L
Address: 8805 SORREL WAY
City-St-Zip: CLERMONT, FL 34711

Title: DS ( ) Delete
Name: BREHM, KATRINA M
Address: 8805 SORREL WAY
City-St-Zip: CLERMONT, FL 34711

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JANIS L. CRABTREE DVT 05/24/2002
Electronic Signature of Signing Officer or Director Date