2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004341

FILED Jan 24, 2007 Secretary of State

Entity Nar	ne: NEW BEG	GINNINGS FELLOWSHIP OF (CITRUS COUNTY, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ORIDA AVE. OO, FL 34442				
Current Mailing Address:			New Mailing Address:		
P.O. BOX (HERNAND	542 OO, FL 34442				
FEI Number:	59-3687970	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
BURKE, JE 2001 E STI INVERNES		US			
	named entity s e of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () BURKE, JEFFR 978 E. RAY STF HERNANDO, FL	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BURKE, PAMEL 978 E. RAY STE HERNANDO, FL	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) SIMON, JESSIC 978 E. RAY STF HERNANDO, FL	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JESSICA SIMON **SECR** 01/24/2007