

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000006203

FILED
Jan 27, 2009
Secretary of State

Entity Name: NEW BEGINNING HEALING MINISTRY, INC.

Current Principal Place of Business:

10189 CARRIAGE HOUSE CT
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

10189 CARRIAGE HOUSE CT.
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 59-3569644 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

TITUS/SAPHRONIA HUTCHINSON
10189 CARRIAGE HOUSE CT.
JACKSONVILLE, FL 32221 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: TITUS L HUTCHINSON SR.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUTCHINSON, TITUS L CEO
Address: 10189 CARRIAGE HOUSE CT.
City-St-Zip: JACKSONVILLE, FL 32221

Title: T () Delete
Name: HUTCHINSON, SAPHRONIA I P
Address: 10189 CARRIAGE HOUSE CT.
City-St-Zip: JACKSONVILLE, FL 32221

Title: V () Delete
Name: PERRY, JULIUS P
Address: 2938 JUSTINA RD.
City-St-Zip: JACKSONVILLE, FL 32277

Title: S () Delete
Name: TRICE, LETTIA S
Address: 8062 SIERRA CT.
City-St-Zip: JACKSONVILLE, FL 32244

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TITUS L HUTCHINSON SR.

CEO

01/27/2009

Electronic Signature of Signing Officer or Director

Date