

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N03000002542

1. Entity Name
NEW DIMENSIONS OUTREACH MINISTRIES, INC.



FILED

09 FEB -3 PM 5: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
~~4756 NW 1675~~ 6175 NW 1675 ST G-14
MIAMI, FL 33014 Mia, FL 33015

Mailing Address
4756 NW 1675
MIAMI, FL 33014



0128209 REINSTATEMENT 08-09

2. Principal Place of Business - No P.O. Box #
6175 NW 1675 ST

3. Mailing Address
6175 NW 1675 ST

Suite, Apt. #, etc.
STG G-14

Suite, Apt. #, etc.
STG G-14

City & State
Miami FL

City & State
Miami FL

Zip
33015

Zip
33015

4. FEI Number
02-0684486

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOSEA, PEGGY
1050 NW 155TH LANE
101
MIAMI, FL 33169

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 *Peggy Hosea*
Signature, typed or printed name of registered agent and title if applicable

Peggy Hosea
(NOTE: Registered Agent signature required when reinstating)

1/28/09
DATE

FILE NOW!!! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME MCKENZIE, EMANUEL J ☐ Delete
STREET ADDRESS 1967 SW 94TH AVE
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE PD
NAME MCKENZIE, KATHY L ☐ Delete
STREET ADDRESS 1967 SW 94TH AVE
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE CHD
NAME JOHNSON, HENRY ☐ Delete
STREET ADDRESS 891 NW 213 TERR, APT 207
CITY-ST-ZIP N MIAMI, FL 33169

TITLE S
NAME LEWIS, RHONDA ☐ Delete
STREET ADDRESS 10905 SW 177 TERR
CITY-ST-ZIP MIAMI, FL 33156

TITLE T
NAME HOSEA, PEGGY ☐ Delete
STREET ADDRESS 1050 NW 155TH LANE # 101
CITY-ST-ZIP MIAMI, FL 33169

TITLE CH
NAME FRANCOIS, LIZCA ☐ Delete
STREET ADDRESS 4435 SW 24TH ST
CITY-ST-ZIP HOLLYWOOD, FL 33023

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 900142712349
CITY-ST-ZIP 02703/09--01016--019 **122.50

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *E. McKenzie*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/28/09