

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90730 014 ****61.25

DOCUMENT # N03000003023

1. Entity Name

NEW BEGINNINGS OF CENTRAL FLORIDA, INC.



Principal Place of Business

336 E. PLANT ST.
WINTER GARDEN FL 34787

Mailing Address

336 E. PLANT ST.
WINTER GARDEN FL 34787

2. Principal Place of Business

4783 Raleigh St

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 784136

Suite, Apt. #, etc.

City & State

Orlando FL

City & State

Winter Garden FL

Zip
32811

Country

Orange

Zip
34778-4136

Country

Orange

4. FEI Number

65-1179569

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

MOORE

CR2E037 (11/03)



6. Name and Address of Current Registered Agent

COLLINS, LISA
1712 AMERICUS MINOR DR.
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent

Name

2538 Lake Debra Dr #23-101

City Orlando

FL

Zip Code 32835

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

Lisa Collins

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-10-04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME COLLINS, LISA
STREET ADDRESS 1712 AMERICUS MINOR DR.
CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE D ☒ Delete
NAME BROWN, BEATRICE
STREET ADDRESS P.O. BOX 585951
CITY-ST-ZIP ORLANDO FL 32858

TITLE D ☐ Delete
NAME COLLINS, HARRY JR.
STREET ADDRESS 1712 AMERICUS MINOR DR.
CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME Jina Wheeler
STREET ADDRESS 926 Croton Rd
CITY-ST-ZIP Celebration, FL 34747

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 32810

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 3475

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

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

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 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 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:

Lisa Collins Lisa Collins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3-4-04

407 445 0274

Daytime Phone #