

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004012

FILED  
Apr 20, 2006  
Secretary of State

**Entity Name:** NEW HORIZON MINISTRY INTERNATIONAL, INC.

**Current Principal Place of Business:**

3910 FALLING ACORN CIR  
LAKE MARY, FL 32746

**New Principal Place of Business:**

1311 E. SECOND STREET  
SANFORD, FL 32772-144

**Current Mailing Address:**

3910 FALLING ACORN CIR  
LAKE MARY, FL 32746

**New Mailing Address:**

1311 E. SECNOD STREET  
SANFORD, FL 32772-144

**FEI Number:** 20-2330496

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEACOCK, ODESSA  
3910 FALLING ACORN CIR  
LAKE MARY, FL 32746 US

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

PEACOCK, ODESSA  
1311 E. SECOND STREET  
SANFORD, FL 32772 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: \_\_\_\_\_

04/20/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PEACOCK, ODESSA  
Address: 3910 FALLING ACORN CIR  
City-St-Zip: LAKE MARY, FL 32746

Title: VP ( ) Delete  
Name: TRADER, SYBIL  
Address: 3910 FALLING ACORN CIR  
City-St-Zip: LAKE MARY, FL 32746

Title: T ( ) Delete  
Name: PEACOCK, JOSHUA  
Address: 3910 FALLING ACORN CIR  
City-St-Zip: LAKE MARY, FL 32746

Title: S ( ) Delete  
Name: FISHER, DEBRA  
Address: 3910 FALLING ACORN CIR  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PEACOCK, ODESSA  
Address: 1311 E. SECOND STREET  
City-St-Zip: SANFORD, FL 32772

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: PEACOCK, JOSHUA  
Address: 1293 OAK GROVE CT  
City-St-Zip: ATLANTA, GA 30316

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 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: ODESSA M. PEACOCK

P

04/20/2006

Electronic Signature of Signing Officer or Director

Date