

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005731

FILED
May 01, 2007
Secretary of State

Entity Name: NEW BEGINNING "SOUL SAVING" MINISTRY, INC.

Current Principal Place of Business:

4603 MARLBORO CIRCLE EAST
JACKSONVILLE, FL 322066136

New Principal Place of Business:

Current Mailing Address:

4603 MARLBORO CIRCLE EAST
JACKSONVILLE, FL 322066136

New Mailing Address:

FEI Number: 65-1198510 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

SPAULDING, ALFRED PAUL BISHOP
4603 MARLBORO CIRCLE EAST
JACKSONVILLE, FL 322066136 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPAULDING, PAUL A BISHOP
Address: 4603 MARLBORO CIRCLE EAST
City-St-Zip: JACKSONVILLE, FL 322066136 DU

Title: STD () Delete
Name: SPAULDING, AMANDA D SECT/TR
Address: 4603 MARLBORO CIRCLE EAST
City-St-Zip: JACKSONVILLE, FL 322066136 DU

Title: VD () Delete
Name: WATTS, DONNA VICEPRE
Address: 3005 WEST 12TH STREET
City-St-Zip: JACKSONVILLE, FL 32254 DU

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:

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: ALFRED PAUL SPAULDING

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date