# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 08, 2009**
**Secretary of State**

DOCUMENT# N03000008418

**Entity Name:** NEW BEGINNING FREEWILL OUTREACH MINISTRIES INC.

**Current Principal Place of Business:**

8840 HANDICARE ST.
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

210 FAIRFAX DR.
PENSACOLA, FL 32503 US

**New Mailing Address:**

**FEI Number: 20-0260998** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

MURDOCK-BROWN, EVELYN V PASTOR
210 FAIRFAX DR.
PENSACOLA, FL 32503 US

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

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: DP ( ) Delete
Name: MURDOCK-BROWN, EVELYN V PASTOR
Address: 210 FAIRFAX DR.
City-St-Zip: PENSACOLA, FL 32503 US

Title: DT ( ) Delete
Name: MURDOCK, NESHIDA V TREASUR
Address: 220 MARIGOLD DR. APT. #103
City-St-Zip: PENSACOLA, FL 32506 US

Title: DS ( ) Delete
Name: SEABRON, TIFFANY R SECRETA
Address: 145 TIGER LILY DR. APT #101
City-St-Zip: PENSACOLA, FL 32506

Title: DD ( ) Delete
Name: BROWN, HERBERT L DEACON
Address: 210 FAIRFAX DR.
City-St-Zip: PENSACOLA, FL 32503

**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: EVELYN V. MURDOCK-BROWN DP 04/08/2009

Electronic Signature of Signing Officer or Director — Date