

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004561

FILED
Mar 09, 2009
Secretary of State

Entity Name: NEW BEGINNING FULL GOSPEL CHURCH INC.

Current Principal Place of Business:

900-D ANASTASIA BLVD.
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

5196 AVENUE B
ST. AUGUSTINE, FL 32095

Current Mailing Address:

131 INDIAN BEND RD
SAINT AUGUSTINE, FL 32095

New Mailing Address:

5196 AVENUE B
ST. AUGUSTINE, FL 32095

FEI Number: 20-1064451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTER, MARK A
131 INDIAN BEND RD
SAINT AUGUSTINE, FL 32095 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: PT () Delete
Name: REGISTER, MARK
Address: 131 INDIAN BEND RD
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: ST () Delete
Name: MCELROY, TONI F
Address: 520 LAKESHORE DR
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: DT () Delete
Name: REGISTER, CHRISTOPHER
Address: 7945 COUNTY RD 214
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: () Delete
Name:
Address:
City-St-Zip:

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: DT () Change (X) Addition
Name: REGISTER, CURTIS W
Address: 369 VARELLA AVENUE
City-St-Zip: SAINT AUGUSTINE, FL 32084

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: CURTIS W. REGISTER

DT

03/09/2009

Electronic Signature of Signing Officer or Director

Date