2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008972

FILED Apr 30, 2012 Secretary of State

Entity Name: "THE WELL" OF NEW BEGINNINGS MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

14522 CHICORA CROSSING
ORLANDO, FL 32828
3136 ATWATER DR.
ORLANDO, FL 32825

Current Mailing Address: New Mailing Address:

P.O. BOX 781961 ORLANDO, FL 32828

FEI Number: 56-2467603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SULLEMUN, CARMEN M PASTOR

14522 CHICORA CROSSING BLVD

ORLANDO, FL 32828 US

SULLEMUN, CARMEN M PASTOR

3136 ATWATER DR.

ORLANDO, FL 32825 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: 04/30/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CEOP

Name: SULLEMUN, CARMEN M PASTOR

Address: 3136 ATWATER DR City-St-Zip: ORLANDO, FL 32825

Title: S

Name: JONES-THOMAS, ANGELA Address: 3246 FAIRFIELD DR City-St-Zip: KISSIMMEE, FL 34743

Title: BOM

Name: STUBBS, EBONY R Address: 3136 ATWATER DR City-St-Zip: ORLANDO, FL 32825

Title: BOM

Name: STOCKS, LONNIE
Address: 509 EVERGREEN AVE.
City-St-Zip: BROOKLYN, NY 11221

Title: BOM

 Name:
 SULLEMUN, TOVA-RACQUEL

 Address:
 16585 BLANCO RD APT # 402

 City-St-Zip:
 SAN ANTONIO, TX 78232

I hereby 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 all other like empowered.

SIGNATURE: CARMEN SULLEMUN CEOP 04/30/2012