

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010220

FILED  
Jan 21, 2010  
Secretary of State

**Entity Name:** NEW SALEM MINISTRIES, INCORPORATED

**Current Principal Place of Business:**

4532 W. KENNEDY BLVD., #333  
TAMPA, FL 336092042

**New Principal Place of Business:**

**Current Mailing Address:**

4532 W. KENNEDY BLVD., #333  
TAMPA, FL 336092042

**New Mailing Address:**

**FEI Number:** 20-3213835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BEST, WYNIE K  
405 N. OREGON AVENUE  
TAMPA, FL 33606 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: T  
Name: EVANS, DWAYNE  
Address: 23023 EAGLES WATCH DRIVE  
City-St-Zip: LAND O'LAKES, FL 34639

Title: S  
Name: BEST, WYNIE K  
Address: 9010 ARNDALE CIRCLE  
City-St-Zip: TAMPA, FL 33615

Title: D  
Name: HUGGINS, JOHN  
Address: 11928 TIMBER HILL DRIVE  
City-St-Zip: RIVERVIEW, FL 33569

Title: D  
Name: PRICE, JOHN  
Address: 11448 OLIVE BRANCH COURT  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: P  
Name: SPENCER, RUFUS  
Address: 511 TUSCANNY PARK LOOP  
City-St-Zip: BRANDON, FL 33511

Title: D  
Name: JENKINS, THADDEUS  
Address: 2714 MUNRO STREET  
City-St-Zip: TAMPA, FL 33603

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: WYNIE K. BEST

RA

01/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date