## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000001665

FILED Mar 24, 2012 Secretary of State

Entity Name: NEW BEGINNINGS MINISTRIES OF HARDEE COUNTY, INC.

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

5969 STEVE ROBERTS SPECIAL ZOLFO SPRINGS, FL 33890

**Current Mailing Address: New Mailing Address:** 

5969 STEVE ROBERTS SPECIAL ZOLFO SPRINGS, FL 33890

FEI Number: 65-1278599 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CALDER, JAMES F 5969 STÉVE ROBERTS SPECIAL ZOLFO SPRINGS, FL 33890

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:** 

CALDER, JAMES F Name:

Address: 5969 STEVE ROBERTS SPECIAL City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: VD

Name: STEVENS, EDWARD L Address: 551 CYPRESS ST. City-St-Zip: WAUCHULA, FL 33873

Title: STD

CALDER, KATHLEEN M Name: Address: 5969 STEVE ROBERTS SPECIAL City-St-Zip: ZOLFO SPRINGS, FL 33890

Title:

Name: LUKE, DAVID MR.

5590 DALLAS MCCLELLAND ROAD Address: City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title:

Name: COFFELL, ARLOA MS. 2330 NICKERSON RD Address: ZOLFO SPRINGS, FL 33890 US City-St-Zip:

Title:

BAKER, MAX MR. Name: Address: 168 OAK MEADOW LANE WAUCHULA, FL 33873 US City-St-Zip:

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: KATHLEEN M. CALDER STD 03/24/2012