

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 22, 2009  
Secretary of State**

DOCUMENT# N06000009780

Entity Name: NEW BEGINNINGS CHRISTIAN FELLOWSHIP MINISTRIES, INC.

**Current Principal Place of Business:**

1608 W AIRPORT BLVD  
SANFORD, FL 32773

**New Principal Place of Business:**

**Current Mailing Address:**

1608 W AIRPORT BLVD  
SANFORD, FL 32773

**New Mailing Address:**

FEI Number: 59-3717390      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GATEN, CATHY D  
520 SAN LANTA CIR  
SANFORD, FL 32771      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: P      ( ) Delete  
Name: GATEN, CATHY D  
Address: 520 SAN LANTA CIR  
City-St-Zip: SANFORD, FL 32771

Title: EV      ( ) Delete  
Name: GATEN, FULTON  
Address: 520 SAN LANTA CIR  
City-St-Zip: SANFORD, FL 32771

Title: ES      ( ) Delete  
Name: DEBOSE, SHAUNDA D  
Address: 122 KEY HAVEN DR  
City-St-Zip: SANFORD, FL 32771

Title: ET      ( ) Delete  
Name: CRUMITY, ROWNIE  
Address: 535 WINDCHASE BLVD  
City-St-Zip: SANFORD, FL 32773

**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: CATHY D. GATEN

P

04/22/2009

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

\_\_\_\_\_  
Date