

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 21, 2009
Secretary of State**

DOCUMENT# N07000006181

Entity Name: NEW BEGINNINGS CHURCH OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

705 TOULON DRIVE
KISSIMMEE, FL 34759

New Principal Place of Business:

Current Mailing Address:

705 TOULON DRIVE
KISSIMMEE, FL 34759

New Mailing Address:

FEI Number: 51-0639749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANABRIA, ARIEL
705 TOULON DRIVE
KISSIMMEE, FL 34759 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: D () Delete
Name: SANABRIA, ARIEL
Address: 705 TOULON DRIVE
City-St-Zip: KISSIMMEE, FL 34759

Title: D () Delete
Name: CASTRO, DAVID
Address: 482 BRITTEN DRIVE
City-St-Zip: KISSIMMEE, FL 34758

Title: D () Delete
Name: VEGA, ADA
Address: 706 PARIS DR
City-St-Zip: KISSIMMEE, FL 34759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SANABRIA, ARIEL
Address: 705 TOULON DRIVE
City-St-Zip: KISSIMMEE, FL 34759

Title: TRES (X) Change () Addition
Name: VEGA, JOSE
Address: 706 PARIS DR.
City-St-Zip: KISSIMMEE, FL 34759

Title: SECR (X) Change () Addition
Name: VEGA, ADA
Address: 706 PARIS DR
City-St-Zip: KISSIMMEE, FL 34759

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: ARIEL SANABRIA

PRES

03/21/2009

Electronic Signature of Signing Officer or Director

_____ Date