

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008804

FILED  
Apr 05, 2010  
Secretary of State

**Entity Name:** NEW BEGINNING SUBSTANCE ABUSE CENTER INC

**Current Principal Place of Business:**

342 24TH AVENUE SW  
VERO BEACH, FL 32962

**New Principal Place of Business:**

**Current Mailing Address:**

342 24TH AVENUE SW  
VERO BEACH, FL 32962

**New Mailing Address:**

FEI Number: 27-0537194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MOTEN, CAROLYN W  
342 24TH AVE SW  
VERO BEACH, FL 32962 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: PD  
Name: MOTEN, JOHN S CEO  
Address: 342 24TH AVE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: VPD  
Name: MOTEN, CAROLYN W  
Address: 342 24TH AVE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: SD  
Name: DORSEY, TRACEY-MARIE  
Address: 342 24TH AVE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: TD  
Name: AKINA, ARTHUR  
Address: 200 W SAHARA AVE, #1010  
City-St-Zip: LAS VEGAS, NV 89102

Title: D  
Name: MCCRAY, HERMAN  
Address: 2315 AVENUE S  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D  
Name: VICKERS, HORACE  
Address: 1930 ECHO LAKE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33407

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: ELDER DR JOHN S. MOTEN

CEO

04/05/2010

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

\_\_\_\_\_  
Date