FLORIDA

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N25082 (1)

1. Corporation Name

NEW CREATION MINISTRIES, INC. OF JENSEN BEACH

Principal Place of Business	Mailing Address
1333 NE JENSEN BCH BLVD JENSEN BEACH FL 34957	1301 SUNVIEW TERRACE JENSEN BEACH FL 34957 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/29/1988	3a. Date of Last Report: 04/27/1994
4. FEI Number: 65-0033611	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SMITH,THOMAS E. JR. 2171 S.E. BISBEE PORT ST. LUCIE FL 34952	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ____ DATE ____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VSD	11 TITLE	☐ Change ☐ Addition
NAME	KRTAUSCH, ROBERTA	12 NAME	
STREET ADDRESS	2161 S.E. BISBEE ST.	13 STREET ADDRESS	
CITY-ST-ZIP	PORT ST LUCIE FL	14 CITY-ST-ZIP	
TITLE	PTD	21 TITLE	☐ Change ☐ Addition
NAME	SMITH, THOMAS E JR	22 NAME	
STREET ADDRESS	2171 S.E. BISBEE ST.	23 STREET ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	CASWELL, JUDY A	32 NAME	
STREET ADDRESS	2161 S.E. BISBEE ST.	33 STREET ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ROBERTA KRTAUSCH/VSD Roberta Krtausch 4/28/95 (407)334-9888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

003078