## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43282

May 03, 2007 Secretary of State

**Entity Name:** NEW DAY MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 201 GORNTO LAKE ROAD BRANDON, FL 33510 **Current Mailing Address: New Mailing Address:** 201 GORNTO LAKE ROAD BRANDON, FL 33510 FEI Number: 59-3123323 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAILEY, MICHAEL T HAILEY, MICHAEL T DR 201 GORNTO LAKE ROAD 201 GORNTO LAKE ROAD BRANDON, FL 33510 BRANDON, FL 33510 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: DR. MICHAEL T HAILEY 05/03/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete HAILEY, MICHAEL T HAILEY, MICHAEL T DR Name: Name: 201 GORNTO LAKE ROAD Address: 201 GORNTO LAKE ROAD Address: City-St-Zip: BRANDON, FL 33510 US City-St-Zip: BRANDON, FL 33510 US Title: () Delete Title: () Change () Addition Name: HAILEY, JASON M Name: Address: 12755 TIMBER RUN Address: City-St-Zip: DADE CITY, FL 33525 City-St-Zip: Title: () Delete Title: () Change () Addition BEARD CLITES, NANCY Name: Name: Address: 201 GORNTO LAKE ROAD Address: City-St-Zip: BRANDON, FL 33510 US City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: MALLAN, ROBERT 5519 WINHAWK WAY Address: Address: City-St-Zip: City-St-Zip: LUTZ,, FL 33558 Title: () Delete Title: ( ) Change (X) Addition TELFORD, ANTHONY Name: Name: 9109 CYPRESS KEEP LANE Address: Address: City-St-Zip: City-St-Zip: ODESSA, FL 33556 Title: () Delete Title: ( ) Change (X) Addition SCARCELLI JR. FRED Name: Name: Address: Address: 114 E BLOOMINGDALE AVENUE BRANDON, FL 33511 City-St-Zip: 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: DR MICHAEL HAILEY Ρ 05/03/2007

**FILED**