

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43837

FILED
Jun 09, 2009
Secretary of State

Entity Name: NEW BEGINNING WORSHIP AND PRAISE MINISTRIES, INC.

Current Principal Place of Business:

C/O EARNESTINE ADDISON JEFFERSON
5111 N PEARL ST
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

C/O EARNESTINE ADDISON JEFFERSON
1767 DAYTONA LANE
JACKSONVILLE, FL 32218 US

New Mailing Address:

FEI Number: 59-3127221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

JEFFERSON, EARNESTINE A
1767 DAYTONA LN
JACKSONVILLE, FL 32218 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: JEFFERSON, EARNESTINE A.
Address: 1767 DAYTONA LANE
City-St-Zip: JACKSONVILLE, FL 32218 DU

Title: T () Delete
Name: BROOKS, LAURETTE
Address: 4727 RUCKNER RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: ST () Delete
Name: STEPHENSON, ELVIRA
Address: 7066 WELLARD RD
City-St-Zip: JACKSONVILLE, FL 32209

Title: V () Delete
Name: BROOKS, LAURETTE
Address: 4727 RUCKNER ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: TR () Delete
Name: LEWIS, LUCILE
Address: 1486 W 25TH ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: TR () Delete
Name: BROOKS, LORRAINE
Address: 4763 BARNES RD
City-St-Zip: JACKSONVILLE, FL 32207

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:

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: EARNESTINE ADDISON JEFFERSON

P

06/09/2009

Electronic Signature of Signing Officer or Director

_____ Date