FILE NOW: FILING FEE IS \$61.2

NONPROFIT CORPORATION ANNUAL REPORT



STATE FLORIDA DEPARTMEN Sandra B. Mor Secretary of S

ONS DIVISION OF CORPO

1996

Principal Place of Business

N49244 DOCUMENT #

1. Corporation Name

(9)

Mailing Address

NEW BEGINNINGS FELLOWSHIP MINISTRIES, INC.

2701 BROADWAY FT LAUDERDALE US	FL 33311	1119 NW 10TH TER FT LAUDERDALE FL 13331-6135 US					
2. Principal Place	of Business	2a. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country 25	Zip C 29 30					
24	9. Name and Address of C	urrent Registered Agent					
DURONT							

FILED Mar 20, 1996 08:00 AM **Secretary of State**



FT LAUDERDALE FL 33311 US		FT LAUDERDALE FL 13331-6135 US			3. Date incorporated or Qualified 06/05/1992	3a. Dat	e of Last Repo 5/01/1995	ort
UV	•				A FEI Number		Appli	ied For
. Principal Place	of Business	2a. Mailing Address			65-0333041			Applicable
		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Ad Fee Req	
Suite, Apt. #, ef	c.	27	_		6. Election Campaign Financing		\$5.00 N	Aay Be
City 8 State		City & State		}	Truct Fund Contribution		Added to	
City & State		28		ry	This cornoration has liability for	intangible ta	ax under s. 199	9.032,
Zip	Country	Zip	——¬ ¯	1'	Charles Charteston	[_] 162 L	140	
¬ '	25	29	30	\	10. Name and Address of New	Hedistered	Agoin	
	9. Name and Address of Curren	t Registered Agent		1 Name				
				2 Street Addr	ess (P.O. Box Number is Not Accepta	able)		
DUPONT, N	AICHAEL							
1119 NW 1	OTH TERRACE			3			85 Zip C	?ode
FT LAUDER	RDALE FL 33311			4 City		FI	_ 1	
				1	ration submits this statement for the part of directors. I hereby accept the ap	ourpose of c	nanging its reg	istered office
	the provisions of Sections 617.050	2 and 617,1508, Florida Statu	ites, the	al -named corpo arcoration's boa	ration submits this statement for the part of directors. I hereby accept the ap	ppointment a	is registered a	gent. Lam
11. Pursuant to	the provisions of Sections 617.050; agent, or both, in the State of Flori	ida. Such change was author	ized by t as.	ne political s s s s				
familiar with,	agent, or both, in the State of Flor and accept the obligations of, Sec	TION DIT.USUS, FIORIDA STATUTE	· · ·		t to a societion)	DATE		
SIGNATURE	ynature, typed or printed name of registered ager	nt and title if applicable.	NOTE: Reg	ent signature requir	ed when reinstating) ADDITIONS/CHANGES TO C	OFFICERS A	ND DIRECTOR	S IN 12
	of FICERS At	ND DIRECTORS		1	7,000		Change	Addition
12.	MT	DELETE	H	1.1				
TITLE	BARNES, RICHARD		1	1.2				
NAME	7402 NW 10 AVE.		· ·	1.1 T ADDRESS				T Addition
STREET ADDRESS	MIAMI FL			1. ST-ZIP			Change	Addition
CITY-ST-ZIP	TD	DELETE		2.				
TITLE	MORROW, RUBY		l	2:				
NAME	PO BOX 10244 NA		1	2. ET ADDRESS				Addition
STREET ADDRESS	RIVIERA BEACH FL			2 ST-ZIP			Change	L] Addition
CITY-ST-ZIP TITLE	D	DELETE		3.				
· •	PRICHARD, JUANITA			3.2 ET ADDRESS				
NAME expect adopted	1109 35TH ST			3.3 - ST - ZIP			Clobonac	☐ Additio
STREET ADDRESS	WEST PALM BEACH FL			3.4			Change	- van
CITY-ST-ZIP	DS	DELETE		4.1 . ME				
NAME	HIGGINS, BRENDA			4.2 ALEET ADDRESS				
STREET ADDRESS	2530 AVE R			4.3 LEET AUDRESS			Change	Additi
1	RIVERA BEACH FL						LT cuards	1_1,100,00
CITY-ST-ZIP TITLE	V	DELETE		51 Æ				
NAME	DUPONT, MICHEAL			5.2 CET ADDRESS				
STREET ADDRESS	1119 NW 10TH TER			5.3 ET REDITION			Change	Addit
	FT LAUDERDALE FL			3.4			☐] Grange	
CITY-ST-ZIP TITLE	Р	DELETE		61				
NAME	DUPONT, VERNA			6.2 T ADDRESS	1			
STREET ADDRESS	1119 NW 10TH TER			6.3		440.03/0	N Florida Sta	tutes. I furth
1 -	CT I ALIENTANALE EL			6.4 SI-ZIP	alify for the exemption stated in Section alify for the exemption s	on 119.07(3) ave the same	kij, riblida sta Negal effect a	s if made un
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	lied with this filing is voluntarily annual report or supplemental proporation or the receiver or t	v furnish		alify for the exemplion sugnature shall he ccurate and that my signature shall he ite this report as required by Chapter	047 Florida	Charles and	that my nam

certify that the information indicated on this annual report or supplemental annual report oath; that I am an officer or director of the corporation or the receiver or trustee empower appears in Block 12 or Block 13 if changed, or on an attachmen with an address. SIGNATURE:

Mrush 15-96 305-533 Dayling Phone

0047294