## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N49244

FILED Apr 21, 2008 Secretary of State

Entity Name: NEW BEGINNINGS CHRISTIAN CENTER MINISTRIES, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1845 N.W. LAUDERH	38 AVE. IILL, FL 33319	US			
Current M	lailing Address	:	New Mailing Addre	ess:	
1845 N.W. LAUDERH	38 AVE. IILL, FL 33319	US			
FEI Number	65-0333041	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
The above	38 AVE. IILL, FL 33319	US ubmits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUI	RE:				
SIGNATUI		Signature of Registered Age	ent	Date	
SIGNATUI OFFICER:				Date  GES TO OFFICERS AND DIRECTOR:	
OFFICER: Title: Name: Address:	Electronion Electronic E	ORS: Delete			
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic  S AND DIRECT  D () I  SNEED, SARIA 4918 CYPRESS COCONUT, FL 3	ORS: Delete WAY 3373 Delete Y	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR	
	Electronic  S AND DIRECT  D () I  SNEED, SARIA 4918 CYPRESS COCONUT, FL 3  TD () I  MORROW, RUB PO BOX 10244 I  RIVIERA BEACH	ORS: Delete WAY 3373 Delete / IA I FL Delete WAY	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	Electronic  S AND DIRECT  D () I  SNEED, SARIA 4918 CYPRESS COCONUT, FL 3  TD () I  MORROW, RUB PO BOX 10244 I  RIVIERA BEACH  D () I  SNEED, DARON 4918 CYPRESS COCNUT CREEK	ORS: Delete WAY 3373 Delete / IA IFL Delete WAY I, FL 33373 Delete WAY I, FL 3BRD	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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: VERNA DUPONT PRES 04/21/2008