

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N92000000560

FILED
Nov 19, 2009
Secretary of State

Entity Name: NEW DIMENSIONS CHRISTIAN CENTER, INC.

Current Principal Place of Business:

3201 W. NAVY BLVD
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

P O BOX 4806
PENSACOLA, FL 32507

New Mailing Address:

FEI Number: 59-3149950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, GREGORY
616 MEANDER LANE
CANTONMENT, FL 32533 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: GREGORY BURNS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURNS, GREGORY
Address: 616 MEANDER LANE
City-St-Zip: CANTONMENT, FL 32533

Title: SD () Delete
Name: DONSON, WILLIE
Address: 102 MONARCH LN
City-St-Zip: PENSACOLA, FL 32503

Title: VD () Delete
Name: JOHNSON, ANTHONY
Address: 1423 TEMPLEMORE DR
City-St-Zip: CANTONMENT, FL 32533

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:

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: ANTHONY JOHNSON

VD

11/19/2009

Electronic Signature of Signing Officer or Director

Date