

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **N93000002795 (3)**

95 JUN 14 AM 9: 20

1. Corporation Name
NEW BEGINNINGS CHURCH, INC.

Principal Place of Business 412 W HWY 90 CRESTVIEW FL 32536	Mailing Address P.O. BOX 627 CRESTVIEW FL 32536 US
---	--

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/22/1993	3a. Date of Last Report 01/24/1894
4. FBI Number 59-3188775	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 412 JAMES AVE BLVD. WEST	2a. Mailing Address 25
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 CRESTVIEW, FL.	City & State 28
Zip 24 32536	Country 29

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**FERGUSON, KERRY
412 W HWY 90
CRESTVIEW FL 32536**

10. Name and Address of New Registered Agent

B1 Name KERRY R. FERGUSON
B2 Street Address (P.O. Box Number is Not Acceptable) 5308 KERWIN RD.
B3
B4 City CRESTVIEW
FL B5 Zip Code 32539-8702

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Kerry R. Ferguson* (NOTE: Registered Agent signature required when re-registering) DATE: **1-22-95**

12. OFFICERS AND DIRECTORS	
TITLE D	NAME FERGUSON, KERRY STREET ADDRESS 292 KING ST CITY - ST - ZIP CRESTVIEW FL 32536
TITLE D	NAME JOHNSON, STANLEY STREET ADDRESS FLORIDA AVE CITY - ST - ZIP CRESTVIEW FL 32536
TITLE D	NAME JOHNSON, BEN STREET ADDRESS 473 E BOWERS ST CITY - ST - ZIP CRESTVIEW FL 32536
TITLE	NAME STREET ADDRESS CITY - ST - ZIP
TITLE	NAME STREET ADDRESS CITY - ST - ZIP
TITLE	NAME STREET ADDRESS CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME FERGUSON, KERRY R.	
13 STREET ADDRESS 5308 KERWIN RD.	
14 CITY - ST - ZIP CRESTVIEW, FL. 32539-8702	
21 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME JOHNSON, STANLEY	
23 STREET ADDRESS 6430 FLORIDA AVE.	
24 CITY - ST - ZIP CRESTVIEW, FL. 32539	
31 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME GASZAR, SUZANNE	
33 STREET ADDRESS 2906 AIRPORT RD.	
34 CITY - ST - ZIP CRESTVIEW, FL. 32539	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Kerry R. Ferguson* (NOTE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) DATE: **1-22-95** **904-689-2788**