

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000000618 (7)

1. Corporation Name

NEW BEGINNINGS INTERNATIONAL INC.

Principal Place of Business

**1024 ANTELOPE TRAIL
WINTER SPRINGS FL 32708**

Mailing Address

**1024 ANTELOPE TRAIL
WINTER SPRINGS FL 32708**



3. Date Incorporated or Qualified

02/03/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

5840 Red Bug Lake Rd.

59-3294116

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

Suite 355

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

City & State

City & State

23

28

Winter Springs, FL

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24

25

29

32708

30

Seminole

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DOSS, THOMAS E III
500 E ALTAMONTE DR
SUITE 210
ALTAMONTE SPRINGS FL 32701**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE

1.1 TITLE **D** ☐ Change ☐ Addition

NAME **LOCKWOOD, HOWARD D**

1.2 NAME

STREET ADDRESS **1024 ANTELOPE TRAIL**

1.3 STREET ADDRESS

CITY-ST-ZIP **WINTER SPRINGS FL 32708**

1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME **LOCKWOOD, JOY B**

2.2 NAME

STREET ADDRESS **1024 ANTELOPE TRAIL**

2.3 STREET ADDRESS

CITY-ST-ZIP **WINTER SPRINGS FL 32708**

2.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

3.1 TITLE **D** ☒ Change ☐ Addition

NAME **~~LAVERY, JACK~~**

3.2 NAME

STREET ADDRESS **~~1012 QUAKER RIDGE CT~~**

3.3 STREET ADDRESS

CITY-ST-ZIP **~~OWIEDO FL 32705~~**

3.4 CITY-ST-ZIP

**LAVERY, JACK
1 Lin Air Farms Road
Wawwely, PA 18471-0756**

TITLE **D** ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME **BARTLE, PHYLLIS**

4.2 NAME

STREET ADDRESS **3344 YOTHERS RD**

4.3 STREET ADDRESS

CITY-ST-ZIP **APOPKA FL 32712**

4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

5.1 TITLE **D** ☒ Change ☐ Addition

NAME **~~GRANT, CHRIS~~**

5.2 NAME

STREET ADDRESS **~~5124 PARK CENTRAL DR APT 525~~**

5.3 STREET ADDRESS

CITY-ST-ZIP **~~ORLANDO FL 32839~~**

5.4 CITY-ST-ZIP

**GENT, CHRIS
5124 PARK CENTAL DR.APT.525
ORLANDO, FL 32839**

TITLE **D** ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME **PLUM, JERRY**

6.2 NAME

STREET ADDRESS **1019 CHESTERFIELD CIR**

6.3 STREET ADDRESS

CITY-ST-ZIP **WINTER SPRINGS FL 32708**

6.4 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 119.07(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 in an attachment with an address.

SIGNATURE:

Howard D. Lockwood III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**\$61.25 3/1/96
Dep by Ban/C**

2/22/96 (407)699-4606

CR2E037 (12/95)