

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 02, 2002 8:00 am
Secretary of State

06-02-2002 90905 030 ****70.00

DOCUMENT # **N96000005078**
1. Entity Name
NEW GENESIS MINISTRIES

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
113 E. CLEVELAND S
Suite, Apt. #, etc.

3. Mailing Address
2926 Roundabout Ln
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Apopka, FL
Zip
32703
Country

City & State
Orlando, FL
Zip
32818
Country

4. FEI Number
59-3409978

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Minnie J ORR**
Street Address (P.O. Box Number is Not Acceptable)
2926 Roundabout Ln
City **ORLANDO** FL **32818**

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. Minnie J. ORR 2926 Roundabout Ln. Orlando, FL 32818	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S-D. Kimberly MASSEY 1623 Ridge pt. DR. Orlando, FL 32808	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. GARY W. Johnson 113 E. CLEVELAND ST Apopka, FL 32703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Minnie J. Orr** **Minnie J. ORR** 5-17-02 **467**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **2926-2335**