


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N97000000184 1. Entity Name NEW VISION WORLD-WIDE MINISTRIES, INC.			
Principal Place of Business 2017 TRIMBLE ROAD APT #2 TALLAHASSEE, FL 32303		Mailing Address 2017 TRIMBLE ROAD APT #2 TALLAHASSEE, FL 32303	
2. Principal Place of Business - No P.O. Box # 2508 Jefferson RD.		3. Mailing Address P.O. Box 3081	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Tallahassee, FL.		City & State Tallahassee, FL.	
Zip 32317		Zip 32315	
Country Leon		Country Leon	
4. FEI Number 59-3423681		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CLEMONS, EDWIN O SR. 2017 TRIMBLE ROAD #2 TALLAHASSEE, FL 32303		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		(NOTE: Registered Agent signature required when reinstating) DATE _____	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PCEO	TITLE	PCEO
NAME	CLEMONS, EDWIN O SR.	NAME	Clemons, Edwin O. SR.
STREET ADDRESS	1648 EAGLES LANDING BLDG	STREET ADDRESS	P.O. Box 3081
CITY-ST-ZIP	TALLAHASSEE, FL 32308	CITY-ST-ZIP	Tallahassee, FL 32315
<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	ST	TITLE	
NAME	HUGHES, WILHELMENIA	NAME	
STREET ADDRESS	P O BOX 3081	STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32315	CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	D	TITLE	
NAME	HOOPER, PATRICIA	NAME	
STREET ADDRESS	1780 IRON BRIDGE RD	STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32333	CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	D	TITLE	
NAME	CLEMONS, CELESTE	NAME	Clemons, Celeste
STREET ADDRESS	410 VICTORY GARDEN DR	STREET ADDRESS	P.O. Box 3081
CITY-ST-ZIP	TALLAHASSEE, FL 32301	CITY-ST-ZIP	Tallahassee, FL 32315
<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	D	TITLE	VP
NAME	GRAHAM, FRANCES	NAME	Frances Graham - Clemons
STREET ADDRESS	P O BOX 3222	STREET ADDRESS	P.O. Box 3222
CITY-ST-ZIP	TALLAHASSEE, FL 32315	CITY-ST-ZIP	Tallahassee, FL 32315
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: EDWIN O. CLEMONS, SR. - Edwin O. Clemons			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small> 4-25-07	
<small>Daytime Phone #</small>			

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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