

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000992

FILED
Apr 02, 2009
Secretary of State

Entity Name: NEW BEGINNING MINISTRY OF GRAND RIDGE, INC.

Current Principal Place of Business:

1165 HWY 69
GRAND RIDGE, FL 32442

New Principal Place of Business:

Current Mailing Address:

1165 HWY 69
GRAND RIDGE, FL 32442

New Mailing Address:

FEI Number: 59-3471636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MIHLFELD, BERYL R
1179 HIGHWAY 69
GRAND RIDGE, FL US

Name and Address of New Registered Agent:

MIHLFELD, BERYL R
1179 HIGHWAY 69
GRAND RIDGE, FL 32442 US

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: DEBRA J. NORRIS

04/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: MIHLFELD, BERYL R
Address: 1179 HIGHWAY 69
City-St-Zip: GRAND RIDGE, FL

Title: D () Delete
Name: LOVETT, ANNIE
Address: 2090 HWY 73
City-St-Zip: MARIANNA, FL 32448

Title: D () Delete
Name: NORRIS, FREDERICK
Address: RT 1 BOX 277
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: NORRIS, DEBRA
Address: RT 1 BOX 277
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: HARRELL, JEREMY
Address: 4720 MEADOWVIEW RD.
City-St-Zip: MARIANNA, FL 32446

Title: D () Delete
Name: HARRELL, KERRIE
Address: 4720 MEADOWVIEW RD.
City-St-Zip: MARIANNA, FL 32446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NORRIS, FREDERICK
Address: 3393 PINE GROVE CHURCH RD.
City-St-Zip: QUINCY, FL 32351

Title: D (X) Change () Addition
Name: NORRIS, DEBRA J
Address: 3393 PINE GROVE CHURCH RD.
City-St-Zip: QUINCY, FL 32351

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: DEBRA J. NORRIS

D

04/02/2009

Electronic Signature of Signing Officer or Director

Date