

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90031 023 ****70.00

DOCUMENT # N97000001268

1. Entity Name

NEW BEGINNINGS BAPTIST CHURCH OF PONTE VEDRA, INC.



Principal Place of Business

1050 HIGHWAY A1A
PONTE VEDRA BEACH FL 32082
US

Mailing Address

P O BOX 309
PONTE VEDRA BEACH FL 32004

50015628



1st MOORE CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3435781

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROWE AND ROWE, P.A.
9471 BAYMEADOWS RD, SUITE 203
JACKSONVILLE FL 32256**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 ☐ Delete
NAME BENNETT, GREGG
STREET ADDRESS 221 STELLAR CT
CITY-ST-ZIP PONTE VEDRA FL 32082

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME VP
NAME BROOKS, SIDNEY 'ALAN'
STREET ADDRESS 657 LAKE STONE CIRCLE
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☒ Change ☐ Addition
NAME VP
NAME Henry, Jeremiah
STREET ADDRESS 11556 Shagbush Lane
CITY-ST-ZIP Jacksonville, FL 32223

TITLE ☒ Delete
NAME S
NAME BARFIELD, LORI
STREET ADDRESS 128 MILLCORE LANDE
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☒ Change ☐ Addition
NAME S
NAME Shneider, Teresa
STREET ADDRESS 7 Starfish Place
CITY-ST-ZIP Ponte Vedra Beach, FL 32082

TITLE ☐ Delete
NAME T
NAME SHEIDER, TERESSA
STREET ADDRESS 7 STARFISH PLACE
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☐ Change ☐ Addition
NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
NAME POWELL, C E
STREET ADDRESS 1800 THE GREENS WAY #401
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250

TITLE ☐ Change ☐ Addition
NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
NAME SMITH, LEON R
STREET ADDRESS 218 NORTH ROSCOE
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☐ Change ☐ Addition
NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/05 904-285-4289