# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 26, 2007 8:00 am**
**Secretary of State**
04-26-2007 90222 008 ****70.00

DOCUMENT # N97000001268

1. Entity Name
NEW BEGINNINGS BAPTIST CHURCH OF PONTE VEDRA, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 1050 HIGHWAY A1A<br>PONTE VEDRA BEACH, FL 32082 US | P O BOX 309<br>PONTE VEDRA BEACH, FL 32004 |

02222007 Chg-NP CR2E037 (12/06)

| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
|---|---|
| | 1050 Highway A1A |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State: Ponte Vedra Beach, FL |
| Zip / Country | Zip: 32082 / Country |

4. FEI Number: 59-3435781 ☐ Applied For ☐ Not Applicable

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.<br>9471 BAYMEADOWS RD, SUITE 203<br>JACKSONVILLE, FL 32256 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is $61.25**
**Due by May 1, 2007**

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 / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>GATES, JEREMY S<br>713 REMBRANT AVE<br>SAINT AUGUSTINE, FL 32095 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>Sheppard, Lee<br>11516 Beacon Drive<br>Jacksonville, FL 32225 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>MOVAY, TODD<br>161 SHELBY'S COVE CT<br>PONTE VEDRA BEACH, FL 32082 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>Millwood, Jack<br>14727 Silver Glen Drive East<br>Jacksonville, FL 32258 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>CLARK, CINDY<br>280 ODOM'S MILL BLVD<br>PONTE VEDRA BEACH, FL 32082 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>McVay, Todd<br>161 Shelby's Cove Ct.<br>Ponte Vedra Beach, FL 32083 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>SHEIDER, TERESSA<br>7 STARFISH PLACE<br>PONTE VEDRA BEACH, FL 32082 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>Lore, Terri<br>210 North Roscoe Blvd.<br>Ponte Vedra Beach, FL 32082 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>POWELL, C E<br>1800 THE GREENS WAY #401<br>JACKSONVILLE BEACH, FL 32250 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SMITH, LEON R<br>218 NORTH ROSCOE<br>PONTE VEDRA BEACH, FL 32082 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ 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:** Jack Millwood JACK MILLWOOD 4/25/07 904-2854288
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #