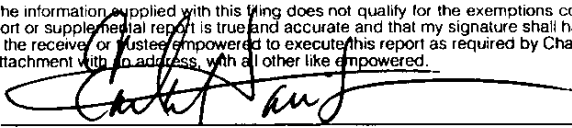


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90190 049 ****61.25

DOCUMENT # N98000003190 1. Entity Name NEW BEGINNINGS LIFE CENTER, INC.					
Principal Place of Business 3350 COMMERCIAL WAY SPRING HILL, FL 34606			Mailing Address 3350 COMMERCIAL WAY SPRING HILL, FL 34606		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				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					
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	TD NEWTON, ANGELA 3350 COMMERCIAL WAY SPRING HILL, FL 34606	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DREW KYCYALA 3350 COMMERCIAL WAY Spring Hill, FL. 34606
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PHELAN, BRIAN 3350 COMMERCIAL WAY SPRING HILL, FL 34606	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARRIGAN, EARL 3350 COMMERCIAL WAY SPRING HILL, FL 34606	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LILLARD, JIM HOUSE OF THE LORD MINISTRIES AUSTIN, TX	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEISSLER, HANS 3350 COMMERCIAL WAY SPRING HILL, FL 34606	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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 no address, with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
				Date 18 April 2007	
Daytime Phone #					