

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005310

FILED
Apr 24, 2004
Secretary of State**Entity Name:** NEW BEGINNINGS GROUP, INC.**Current Principal Place of Business:**820 GERHARDT DRIVE
PENSACOLA, FL 32503**New Principal Place of Business:****Current Mailing Address:**820 GERHARDT DRIVE
PENSACOLA, FL 32503**New Mailing Address:****FEI Number:** 59-3597194**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ECHSNER, CHRIS G ESQ.
820 GERHARDT DRIVE
PENSACOLA, FL 32503**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOOLE, JANICE S
Address: 4075 AIKEN RD
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: ECHSNER, CHRIS G
Address: 820 GERHARDT DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: ECHSNER, STEPHEN H
Address: 316 S. BAYLEN STREET #400
City-St-Zip: PENSACOLA, FL 32501

Title: D (X) Delete
Name: REA, JEAN
Address: 1836 OLIVE RD
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: MCGUIRE, THOMAS F III
Address: 190 GOVERNMENTAL CENTER
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: EMPIE, KIM
Address: 1062 SOUTH HWY 97
City-St-Zip: CANTONMENT, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOOLE, JANICE S
Address: 820 GERHARDT DRIVE
City-St-Zip: PENSACOLA, FL 32503

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

Title: () Change () Addition
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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 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 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: CHRIS G. ECHSNER

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04/24/2004

Electronic Signature of Signing Officer or Director

Date