

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004369

Entity Name: NEW BEGINNINGS OUTREACH MINISTRIES OF CENTRAL FLORIDA, INC

FILED
Feb 10, 2015
Secretary of State
CC7642892461

Current Principal Place of Business:

919 OBSERVATORY COURT
ORLANDO, FL 32818

Current Mailing Address:

919 OBSERVATORY COURT
ORLANDO, FL 32818

FEI Number: 35-2335133

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BIGGS, VIRGINIA L
919 OBSERVATORY COURT
ORLANDO, FL 32818 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name BIGGS, VIRGINIA L
Address 919 OBSERVATORY COURT
City-State-Zip: ORLANDO FL 32818

Title VP
Name BIGGS, KEITH E
Address 919 OBSERVATORY COURT
City-State-Zip: ORLANDO FL 32818

Title T
Name RESTAINO, CAROL
Address 808 CALABRIA DRIVE
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title BOARD
Name HUSSEY, JEFFREY
Address 853 VICTORIA TER
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title BOARD
Name CROSS, TERRIE
Address 844 GROVESMERE LOOP
City-State-Zip: OCOEE FL 34761

Title BOARD
Name CRAIG, TOWNSEND
Address 3650 CUMBRIA COURT
City-State-Zip: APOPKA FL 32712

Title BOARD
Name RHONDA, TOWNSEND
Address 3650 CUMBRIA COURT
City-State-Zip: APOPKA FL 32712

Title BOARD
Name REILLY, DIANNE
Address 1320 CRESCENT LAKE DRIVE
City-State-Zip: WINDERMERE FL 34786

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I hereby 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 all other like empowered.

SIGNATURE: VIRGINIA L. BIGGS

PRESIDENT

02/10/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOARD
Name MOJICA, VICTOR
Address 3014 ISLAND BAY CIRCLE
City-State-Zip: SANFORD, FL 32771

Title SECRETARY
Name MOJICA, STEPHANIE
Address 3014 ISLAND BAY CIRCLE
City-State-Zip: SANFORD FL 32771