

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009121

Entity Name: NEW BEGINNING REVIVAL CENTER, INC.

Current Principal Place of Business:

1113 HWY 92 WEST
AUBURNDALE, FL 33823

Current Mailing Address:

P O BOX 2089
AUBURNDALE, FL 33823

FEI Number: 32-0191576

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONDAY, JUANELL
2575 SUNRISE TERRACE
AUBURNDALE, FL 33823 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 OD
Name LISCOME, ANTHONY
Address P O BOX 2089
City-State-Zip: AUBURNDALE FL 33823

Title OD
Name CHILDS, RICKY
Address 1113 HWY 92 WEST
City-State-Zip: AUBURNDALE FL 33823

Title OD
Name JESTER, KENNETH
Address 1113 HWY 92 WEST
City-State-Zip: AUBURNDALE FL 33823

Title OD, BOARD MEMBER
Name JOHNS, ANNA RUTH BOARD MEMBER
Address P O BOX 2089
City-State-Zip: AUBURNDALE FL 33823

Title S
Name CUEVAS, ANNA
Address 1113 HWY 92 WEST
City-State-Zip: AUBURNDALE FL 33823

Title PASTOR
Name MONDAY, JUANELL
Address 1113 HWY 92 WEST
City-State-Zip: AUBURNDALE FL 33823

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: JUANELL MONDAY

PASTOR

03/02/2018

Electronic Signature of Signing Officer/Director Detail

Date