

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
May 12, 2003 8:00 am
Secretary of State

05-12-2003 90218 041 ****61.25

UBR037

DOCUMENT # N03214

1. Entity Name
PINEWOOD BIBLE CHAPEL, INC.



Principal Place of Business
**112 N OAK ST
LANTANA FL 33462
US**

Mailing Address
**112 N OAK ST
LANTANA FL 33462
US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **NOT APPLICABLE**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**ZOTTO, LOUIS A
10684 GREENTRAIL DR. S.
BOYNTON BEACH FL 33436**

7. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

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 **VD** Delete
NAME **MITZELFELD, WARD**
STREET ADDRESS **375 WAYMAN CIRCLE E**
CITY-ST-ZIP **WEST PALM BEACH FL 33413**

TITLE ~~_____~~ Change Addition
NAME ~~_____~~
STREET ADDRESS ~~_____~~
CITY-ST-ZIP ~~_____~~

TITLE **TD** Delete
NAME **ZOTTO, LOUIS A**
STREET ADDRESS **10684 GREENTRAIL DRIVE S**
CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE **D** Change Addition
NAME **Neil Van Hoogen**
STREET ADDRESS **5845 N. Ocean Blvd.**
CITY-ST-ZIP **Ocean Ridge, FL 33435**

TITLE **PD** Delete
NAME **LOWMAN, BUDDY**
STREET ADDRESS **400 VIA LUGANO CIRCLE APT 209**
CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE **D** Change Addition
NAME **Mark Williams**
STREET ADDRESS **4500 S. Ocean Blvd., Apt. 401**
CITY-ST-ZIP **Palm Beach, FL 33480**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Louis A Zotto* SIGNATURE REQUIRED: **Louis A Zotto, TREASURER 5/10/03 561-731-5305**

CR2E037 (10/02)