

**2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N17000005535

**Entity Name:** MARANATHA BIBLE INSTITUTE, INC.**Current Principal Place of Business:**799 S. NOVA ROAD  
ORMOND BEACH, FL 32174**Current Mailing Address:**799 S. NOVA ROAD  
ORMOND BEACH, FL 32174 US**FEI Number:** 82-3431308**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MUENCH, DENNIS  
190 QUAIL RUN  
ORMOND BEACH, FL 32174 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:** DENNIS MUENCH

07/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                       |
|-----------------|-----------------------|
| Title           | P/D                   |
| Name            | MUENCH, DENNIS DR.    |
| Address         | 190 QUAIL RUN         |
| City-State-Zip: | ORMOND BEACH FL 32174 |

|                 |                        |
|-----------------|------------------------|
| Title           | DIR                    |
| Name            | HORNE, BISHOP DON PHD. |
| Address         | 1028 CLEARWATER RD.    |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

|                 |                                       |
|-----------------|---------------------------------------|
| Title           | DIR                                   |
| Name            | REYES, TY                             |
| Address         | 1451 W. CYPRESS CREEK RD.,STE.<br>300 |
| City-State-Zip: | FT. LAUDERDALE FL 33309               |

|                 |                                        |
|-----------------|----------------------------------------|
| Title           | DIR                                    |
| Name            | NORTON, KEVIN DR.                      |
| Address         | 1451 W. CYPRESS CREEK RD., STE.<br>300 |
| City-State-Zip: | FT. LAUDERDALE FL 33309                |

|                 |                                        |
|-----------------|----------------------------------------|
| Title           | DIR                                    |
| Name            | NORTON, JOANN DR.                      |
| Address         | 1451 W. CYPRESS CREEK RD., STE.<br>300 |
| City-State-Zip: | FT. LAUDERDALE FL 33309                |

*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:** DENNIS MUENCH

PD

07/30/2019

Electronic Signature of Signing Officer/Director Detail

Date