

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701398

FILED
Feb 15, 2005
Secretary of State

Entity Name: HOBE SOUND BIBLE COLLEGE INC.

Current Principal Place of Business:

11298 SE GOMEZ AVE
P. O. BOX 1065
HOBE SOUND, FL 33475

New Principal Place of Business:

Current Mailing Address:

11298 SE GOMEZ AVE
P. O. BOX 1065
HOBE SOUND, FL 33475

New Mailing Address:

FEI Number: 59-1407629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STETLER, P. DANIEL
8858 SE KINGSLEY ST
HOBE SOUND, FL 33455 US

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: WHITNEY, ANDREW REV,
Address: 1250 COUNTY LINE RD
City-St-Zip: SCHENECTADY, NY 12306

Title: S () Delete
Name: STRAIGHT, KENDALL III
Address: 84 KINGSLEY DR
City-St-Zip: MASSENA, NY 13662

Title: D () Delete
Name: KEATON, JAMES B -SR
Address: 11305 GOMEZ AVE
City-St-Zip: HOBE SOUND, FL 33455

Title: VD () Delete
Name: BAKER, CHARLES
Address: 4646 PLINNEY FARLOW RD
City-St-Zip: TRINITY, NC 27370

Title: P () Delete
Name: STETLER, P. DANIEL
Address: 8858 SE KINGSLEY ST
City-St-Zip: HOBE SOUND, FL 33455

Title: CD () Delete
Name: KNAPP, WESLEY
Address: 380 ROCKHILL RD.
City-St-Zip: VOOHEESVILLE, NY 12186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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:

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: P. DANIEL STETLER

RA

02/15/2005

Electronic Signature of Signing Officer or Director

Date