

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705341

FILED
Jun 14, 2004
Secretary of State

Entity Name: BIBLETOWN COMMUNITY CHURCH, INC.

Current Principal Place of Business:

470 NW 4TH AVE
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

P O BOX A
BOCA RATON, FL 33429016 US

New Mailing Address:

FEI Number: 59-0766965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRUBHAR, JOHN
470 NW 4TH AVE
BOCA RATON, FL 33432 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: PD () Delete
Name: MITCHELL, WILLIAM JR
Address: 470 N W 4TH AVENUE
City-St-Zip: BOCA RATON, FL 33432

Title: VD () Delete
Name: STOKKE, ORTON DR
Address: 470 NW 4TH AVENUE
City-St-Zip: BOCA RATON, FL 33432

Title: S () Delete
Name: MONTGOMERY, MARK
Address: 470 NW 4TH AVE
City-St-Zip: BOCA RATON, FL 33432

Title: T () Delete
Name: WHITE, CHUCK
Address: 470 NW 4TH AVE
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COTTON, WAYNE
Address: 470 N W 4TH AVENUE
City-St-Zip: BOCA RATON, FL 33432

Title: () Change () Addition
Name:
Address:
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: WAYNE COTTON

PD

06/14/2004

Electronic Signature of Signing Officer or Director

Date