2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 07, 2005 8:00 am **DOCUMENT # 706821 Secretary of State** 1. Entity Name 02-07-2005 90061 018 ****61.25 VENICE BIBLE CHURCH OF VENICE, FLORIDA, INC. Mailing Address Principal Place of Business 2395 W. SHAMROCK DRIVE VENICE FL 34293 2395 W. SHAMROCK DRIVE VENICE FL 34293 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 59-1420344 Not Applicable Country \$8,75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DE BOAR, ROBERT J. Street Address (P.O. Box Number is Not Acceptable) 227 NOKÓMIS AVENUE SOUTH VENICE FL 33595 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 Signature, typed or printed name of registered agent and little if applicable Make Check Payable to " FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. DT SWANSON BILLY POLL PL ☐ Change Addition TITLE Delete TITLE CROTTS, BOBBY D NAME NAME 1200 S VENICE BLVD STREET ADDRESS STREET ADDRESS VENICE, FL 34292 VENICE FL 34293 CITY-ST-ZIP CITY-ST-ZIP DC HART, J.M 2638 BRYSHORD DA. DC Change Addition TITLE ☐ Delete TITLE LYON, BILL NAME NAME 825 WRIGHT ST STREET ADDRESS STREET ADDRESS Englewood, FL 34233 ENGLEWOOD FL 34223 CITY-ST-ZIP CITY-ST-ZIP Addition DS ☐ Change TITLE ☐ Delete THIF FUCKER PAUL FRIMMEL, JERRY NAME NAME 10078 Senbroom Ave 116 WOODINGHAM DR STREET ADDRESS STREET ADDRESS VENICE FL 34292 CITY-ST-7/P ENGLEWOOD, FL 34004 CITY-ST-ZIP ☐ Addition Detete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 trusted appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

R. PAUL TUCKER 1-29-05 941-493-0788

OR Date Daytime Phone #