


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90033 049 ****70.00

DOCUMENT # 709322	
1. Entity Name BIBLE CHAPEL, INC.	

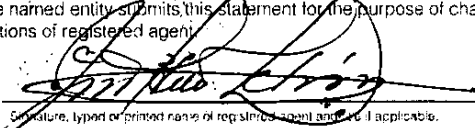
Principal Place of Business 112 TILDENVILLE SCHOOL ROAD SCHOOL ROAD WINTER GARDEN FL 34787 US	Mailing Address PO BOX 784358 WINTER GARDEN FL 34778
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2. Principal Place of Business - No P.O. Box # 112 Tildenville School Road	3. Mailing Address P.O. Box 784358
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Winter Garden, Florida	City & State Winter Garden, Florida
Zip 34787	Zip 34778
Country —	Country —

1st MOORE	CR2E037 (10/07)
4. FEI Number 59-1144588	Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HERRERA, JUAN 224 HARBOR DRIVE WINTER GARDEN FL 34787	
7. Name and Address of New Registered Agent Name Juan Herrera Lebrón Street Address (P.O. Box Number is Not Acceptable) 224 Harbor Drive City Winter Garden FL Zip Code 34787	

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 	DATE 2-9-08

FILE NOW. FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME HERRERA, JUAN HELDER		NAME	
STREET ADDRESS 224 HARBOR DRIVE		STREET ADDRESS	
CITY-ST-ZIP WINTER GARDEN FL 34787		CITY-ST-ZIP	
TITLE ST	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME HERRERA, PAULA		NAME	
STREET ADDRESS 224 HARBOR DR		STREET ADDRESS	
CITY-ST-ZIP WINTER GARDEN FL 34787		CITY-ST-ZIP	
TITLE MD	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME SERRANO, ROBERTO		NAME	
STREET ADDRESS 152 TIMBERCREEK PINES CR	} DELETE	STREET ADDRESS	
CITY-ST-ZIP WINTER GARDEN FL 34787		CITY-ST-ZIP	
TITLE BM	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME RAMOS, THEODORE		NAME	
STREET ADDRESS 410 W BAY STREET		STREET ADDRESS	
CITY-ST-ZIP WINTER GARDEN FL 34787		CITY-ST-ZIP	
TITLE BM	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME MANUEL, ADORNO		NAME	
STREET ADDRESS 2175 GREYSTONE TRAIL		STREET ADDRESS	
CITY-ST-ZIP ORLANDO FL 32818		CITY-ST-ZIP	
TITLE BM	<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
NAME MARQUEZ, NILDA E		NAME	
STREET ADDRESS 410 W BAY ST		STREET ADDRESS	
CITY-ST-ZIP WINTER GARDEN FL 34787		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.	
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SIGNATURE: 	February 9, 2008 407-877-8396
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