2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709406

FILED Jaņ 2<u>8, 2</u>009 Secretary of State

Entity Name: PENSACOLA BIBLE INSTITUTE, INC.

Current Principal Place of Business: New Principal Place of Business:

1169 JO JO ROAD PENSACOLA, FL 32514

Current Mailing Address: New Mailing Address:

1169 JO JO ROAD PENSACOLA, FL 32514

FEI Number: 59-1101615 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MITCHELL, ROBERT W 1169 JO JÓ ROAD.

PENSACOLA, FL 32514 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete RUCKER, CARTER N ROBERSON, GLENN Name: Name:

984 HWY 297-A Address: 7320 BETA LANE Address: City-St-Zip: CANTONMENT, FL City-St-Zip: PENSACOLA, FL 32504

Title: Title: () Delete () Change () Addition

MILLAR, LES Name: Name: Address: 5501 WILLARD NORRIS RD Address: City-St-Zip: MILTON, FL 32570 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

RUCKMAN, PETER S, Name: RUCKMAN, PETER S, Name: 8808 CHISHOLM RD Address: Address: 8808 CHISHOLM RD City-St-Zip: PENSACOLA, FL City-St-Zip: PENSACOLA, FL 32514

Title: () Delete Title: () Change () Addition

Name: CLIPPER, ROY Name: 3299 ARBOR RIDGE CIRCLE Address: Address: City-St-Zip: LILLIAN, AL 36549 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MITCHELL, ROBERT, MITCHELL, ROBERT, Name: Name: 1169 JO JO ROAD 1169 JO JO ROAD Address: Address: City-St-Zip: PENSACOLA, FL City-St-Zip: PENSACOLA, FL 32514

Title: () Delete Title: (X) Change () Addition

DONOVAN, BRIAN, DONOVAN, BRIAN. Name: Name: Address: 9687 PICKWOOD DR Address: 9687 PICKWOOD DR PENSACOLA, FL 32514 PENSACOLA, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT W. MITCHELL **TREA** 01/28/2009