FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 23 AM 9:12

DOCUMENT # 718999 (6)

1. Corporation Name
BIBLE ALLIANCE, INC.

Principal Place of Business	Mailing Address
1115 6TH AVENUE,WEST P.O.BOX 1848 BRADENTON FL 34206	1115 6TH AVENUE,WEST P.O.BOX 1848 BRADENTON FL 34206

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/13/1970
3a. Date of Last Report: 01/28/1994
4. FEI Number: 23-7178299 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

9. Name and Address of Current Registered Agent

ALEPPO, JOSEPH A.
1115 6TH AVENUE,WEST
BRADENTON FL 34205

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S	1.1 TITLE		☒ Change ☐ Addition
NAME	MADISON, DANIEL Q.	1.2 NAME		
STREET ADDRESS	1115 6TH AVE W.	1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 00000	1.4 CITY-ST-ZIP	Bradenton, FL 34205	
TITLE	D	2.1 TITLE		☒ Change ☐ Addition
NAME	ROSSI, SANNA B.	2.2 NAME		
STREET ADDRESS	1115 6TH AVE, W	2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 00000	2.4 CITY-ST-ZIP	Bradenton, FL 34205	
TITLE	DPT	3.1 TITLE		☒ Change ☐ Addition
NAME	ALEPPO, JOSEPH A.	3.2 NAME		
STREET ADDRESS	1115 6TH AVE. W.	3.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	Bradenton, FL 34205	
TITLE	D	4.1 TITLE		☒ Change ☐ Addition
NAME	ALEPPO, GEORGIA	4.2 NAME	Aleppo, Georgia R.	
STREET ADDRESS	1115 6TH AVE. W.	4.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	Bradenton, FL 34205	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on any attachment with an address.

SIGNATURE: _____ JOSEPH A. ALEPPO 1/13/95 813-748-4100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0002383