FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

731230

(9)

SOUTHEASTERN U.S. REGION OF OPEN BIBLE STANDARD CHURCHES, INC.

CHURCHES, INC.								
Principal Piace	of Business	Mailing Address			I NOBERIN KODOD LINDA INBIO HIDOD LERIKALI.	Jái eie il e ieil bioli	HANN BURN BURN FARN	
2100 4TH ST ST. PETERSBURG FL 33704 US		2100 · 4TH ST St. Petersburg FL 3370 US	ST. PETERSBURG FL 33704-4312					
					3. Date Incorporated or Qualified 11/25/1974	3a. Date of L 06/19	ast Report 9/1996	
2. Principal Place of Business 2a. Mailing Addre					4. FEI Number		Applied For	
Suite, Apt. #, etc.		26		59-2917347		Not Applicable		
22		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
Z (p)	Country	28 Zip	Country	ı	Trust Fund Contribution		dded to Fees	
24	25	29	30		This corporation has liability for in Florida Statutes	ntangible tax un] Yes	ider s. 199.032,	
	9. Name and Address of Curr	rent Registered Agent]]		10. Name and Address of New Reg	stered Agent		
			81	Name				
Piper, K		82 Street Address (P.O. Box Number is Not Acceptable)						
210 6 4TH								
ST. PETE	RSBURG FL 33704		83					
			84	City	· · · · · · · · · · · · · · · · · · ·	FL 85	Zip Code	
11. Pursuant t	o the provisions of Sections 617.0	502 and 617 1508. Florida Statut	es the above	a-named co	rporation submits this statement for the p		ning its registered	
Office of re	egistered agent, or both, in the Standard agent, or both, in the Standard accept the ob-	ale of Florida. Such change was a	authorized by	tha cornor	ation's board of directors. I hereby accep	t the appointme	ent as registered	
SIGNATURE	mornio with and accept the ob	ilgations of, Section 011.0303, Fit	Jilua Statutes).				
SIGNATURE _	Signature, typed or printed name of registered	agont and title if applicable (NOT	E: Rugistered Age	nt signature req	uired when reinstating)	DATE	······	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE		
TITLE	PD	☐ DELETE	1.1 TITLE			Ch	ange Addition	
NAME	PIPER,KENNETH C.		1.2 NAME					
STREET ADDRESS	2100 4TH ST. N.		1.3 STREET					
CITY-ST-ZIP TITLE	ST. PETERSBURG FL VD	☐ DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP			anno Addition	
NAME	KING, JACK		2.1 TITLE 2.2 NAME			☐ Ch	ange Addition	
STREET ADDRESS	526 EAST 8TH AVE		2.3 STREET	+nnpree		_		
CITY-ST-ZIP	TALLAHASSEE FL		2.4 CITY-S					
TITLE	STD	☐ DELETE	31 TITLE		sto	Ch Ch	ange	
NAME	HOLCOMB, GRACE		3.2 NAME	G	Amble, GRACE Holco 4101 BARASCALE LA	mb		
STREET ADDRESS	7608 W. HANNA		3.3 STREET	ADDRESS (4101 BARASJALE LA	Ne		
CHY-ST-ZIP	TAMPA FL		3.4. CITY-S	T-ZIP	AMPA, FL 33625			
TITLE		☐ DELETE	4.1 TITLE		- ,	☐ Ch	ange Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CiTY-ST-ZiP		Drure	4.4 CITY-S	T-ZIP				
TITLE		DELETE	5.1 TITLE			∐ Ch	ange L Addition	
NAME CTREET ADDRESS			5.2 NAME	+DDDCC				
STREET ADDRESS			5.3 STREET	l l				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-SI 6.1 FITLE	1-212		☐ Ch	ange Addition	
NAME			6.2 NAME				migy Lighting)	
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST					
14. I do hereb	y certify that the information supp	lied with this filing does not qualif	y for the exer	motion state	ed in Section 119.07(3)(i), Florida Statutes	I further certify	that the	
l am an of	h indicated on this annual report of ficer or director of the corporation i Block 12 or Block 13 if changed	or the receiver or trustee empow	ered to exec	rate and the ute this rep	at my signature shall have the same legal ort as required by Chapter 617, Florida St	effect as if mad atutes; and that	de under oath; that I my name	

SIGNATURE

Rev Ke MAN THE CPIPEL SIGNATURE AND TYPED OR PRINTED NAME OF

C face

1-16.97

Dayline Phone # 0050015

FILED

Feb 05 1997 8:00am

Secretary of State