

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 25, 2009
Secretary of State**

DOCUMENT# 734520

Entity Name: OCALA BIBLE CHAPEL, INC.

Current Principal Place of Business:

729 NE 2ND STREET
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

729 NE 2ND STREET
OCALA, FL 34470

New Mailing Address:

FEI Number: 59-2997910 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUNDERS, ROBERT L
2424 SE 12 STREET
OCALA, FL 34471 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SAUNDERS, ROBERT L
Address: 2424 SE 12TH STREET
City-St-Zip: OCALA, FL 34471

Title: VD () Delete
Name: WEIR, GODFREY
Address: 573 SILVER COURSE CIRCLE
City-St-Zip: OCALA, FL 34472

Title: SD () Delete
Name: SHERWOOD, HOWARD
Address: 8801 A SW 92 ST
City-St-Zip: OCALA, FL 34481

Title: T () Delete
Name: SHARP, DONALD B
Address: 15878 SW 11 TERR RD
City-St-Zip: OCALA, FL 34473

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 L. SAUNDERS

PD

02/25/2009

Electronic Signature of Signing Officer or Director

_____ Date