## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

735749 **DOCUMENT #** 

(4)

THE BIBLE PUPPETS, INC.  Principal Place of Business  Mailing Address  1225 PALOMAR PL #67  VISTA CA 92084  Milling Address  1225 PALOMAR PL #67  VISTA CA 92084									
						<ol> <li>Date Incorporated or Qualified 05/05/1976</li> </ol>		te of Last F <b>02/23/19</b>	
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number 95-3064179	<u>.</u>	<del>+</del>	pplied For lot Applicable
Suite, Apt. #	t, etc.	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 Added to Fees		
Zip	Country	Zip	Col	ntry		Trust Fund Contribution  8. This corporation has liability for i	ntangible ta	x under s.	
4	25	29	30	_		Fiorida Statutes L  10. Name and Address of New R	Yes 🗆		
·-···	9. Name and Address of Curre	nt Hegistered Agent		81	Name	IU. Name and Address of New H	efision (	April	
DAVIS, R					Street Add	dress (P.O. Box Number is Not Acceptab	ile)		
221 N.W 38TH ST. FT. LAUDERDALE FL 33309				B3					
FI. DAUL	DENUALE PL 33309								
				84	City		FL	85 Zip	Code
12.		ND DIRECTORS	13.		r1 signature requir	red when reinstating: ADDITIONS/CHANGES TO OFF			RS IN 12
TITLE	PD LUTTOURNE LANGE	_		1 1 TITLE 1.2 NAME			ı	Change	☐ Addition
NAME	HUTCHINS, JANICE 1225 PALOMAR PL #67								
STREET ADDRESS	VISTA CA				T ADDRESS				
CITY-ST-ZIP TITLE	STD	DELETE	2.1 7		ST-ZIP			Change	Addition
NAME	DAVIS, MITCHELL R.		221						
STREET ADDRESS	1225 PALOMAR PL #67				T ADDRESS				
CITY-ST-ZIP	VISTA CA		2.4	CITY -	ST-ZIP				
TITLE	VD	DELETE	31 T					Change	Addition Addition
NAME	DAVIS, ROSE		3.2 ∱	IAMÉ					
STREET ADDRESS	221 NW 38 ST		3.3 5	TREE	T ADDRESS				
CITY - ST - ZIP	FT LAUDERDALE FL	<del></del>			ST-ZIP				T Address
TITLE		DELETE		ITLE				☐ Change	☐ Addition
NAME				NAME	1				
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP		DELETE			S1-ZiP			Change	Addition
TITLE				ITLE				☐ Augusta	
NAME				NAME	T ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP TITLE		DELETE		JITLE	ST-ZIP			Change	☐ Addition
NAME				NAME	i				-
STREET ADDRESS					T ADDRESS				
					ST-ZIP				
CITY-ST-ZIP	l					v for the exemption stated in Section 119	1.07/21/(L) El	orido Statu	too I further

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)(k). 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 an attachment with an address.

SIGNATURE:

WITCHELL R. DAVIS

Late

Date

Distance Profes

D