

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # 740669
 1. Entity Name
CHRISTIAN HOME AND BIBLE SCHOOL, INC.



Principal Place of Business Mailing Address
301 WEST 13TH AVE **301 WEST 13TH AVE**
MT. DORA, FL 32757 **MT. DORA, FL 32757**

DO NOT WRITE IN THIS SPACE



01262004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-0855390 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MOORE, JAMES E
33540 WESLEY ROAD
MT DORA, FL
EUSTIS, FL 32736

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8. 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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOUCK, JAMES 34515 HAMMOND LANE EUSTIS, FL 32736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOORE, JAMES E 33540 WESLEY ROAD EUSTIS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SUTTON, HAROLD 11208 LONGWOOD CT BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FD MARAIO, ARMANDO 712 TREELINE PLACE SANFORD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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UD00000121101
 04/20/04-80036-011 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James E. Moore 4/14/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #