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Apr 23 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 744225 (4)

1. Corporation Name

EVANGELICAL BIBLE MISSION TO THE PHILLIPINES, IN
C.

Principal Place of Business

526 PALMETTO ST.
PO BOX 6397
WEST PALM BEACH FL 33405-7397

Mailing Address

P O BOX 6397
WEST PALM BEACH FL 33405-0397
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 33405-0397

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29

Country

30

3. Date Incorporated or Qualified
09/11/1978

3a. Date of Last Report
04/10/1996

4. FEI Number

59-1867556

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WINSINGER, DAVID R.
852 FORESTERIA DR.
LAKE PARK FL 33403

10. Name and Address of New Registered Agent

81 Name

EDITH P. WINSINGER

82 Street Address (P.O. Box Number is Not Acceptable)

526 PALMETTO ST

83

84 City

WEST PALM BEACH

FL

85 Zip Code

33405

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Edith P. Winsinger*

EDITH P. WINSINGER

APRIL 14, 1997

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TO ☐ DELETE
NAME CHRISANA, RICHERT
STREET ADDRESS 736 ELAINE RD
CITY-ST-ZIP W PALM BEACH, FL 00000

TITLE D ☐ DELETE
NAME WINSINGER, DAVID R
STREET ADDRESS 852 FORESTERIA DR
CITY-ST-ZIP LAKE PARK, FL 00000

TITLE VSD ☐ DELETE
NAME WINSINGER, EDITH P
STREET ADDRESS 526 PALMETTO ST
CITY-ST-ZIP W PALM BEACH, FL 00000

TITLE D ☒ DELETE
NAME EAST, VIOLET
STREET ADDRESS 3701 S W 107TH AVE
CITY-ST-ZIP MIAMI, FL 00000

TITLE PD ☐ DELETE
NAME RICHERT, GEORGE E
STREET ADDRESS 736 ELAINE ROAD
CITY-ST-ZIP W PALM BEACH, FL 00000

TITLE D ☐ DELETE
NAME EAST, VIOLET
STREET ADDRESS PO BOX 95
CITY-ST-ZIP FLEETWOOD NC 95

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

EAST, VIOLET
INCORRECT
DUPLICATE NAME
MOVED TO N.C.

EAST, VIOLET
CORRECT

14. I do hereby certify that the information supplied with this filing 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 an attachment with an address.

4/14/97 Edith P. Winsinger

CR2E037 (9/96)