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Apr 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **747850** (6)

1. Corporation Name

FAITH BIBLE THEOLOGICAL SEMINARY, INC.

Principal Place of Business	Mailing Address
1207 HAMILTON BRIDGE ROAD MILTON FL 32570	1207 HAMILTON BRIDGE ROAD MILTON FL 32570

3. Date Incorporated or Qualified

06/28/1979

4. FEI Number

59-6554316

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25 Zip

26 Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JOHNSON, EDWIN MAC
1207 HAMILTON BRIDGE ROAD
MILTON FL 32570**

81 Name

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

83

84 City

FL

85 Zip Code

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

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	D	<input checked="" type="checkbox"/> DELETE
NAME	DREW, DUANE	
STREET ADDRESS	6508 SYKINE DR.	
CITY-ST-ZIP	MILTON, FL 00000	

TITLE	S	<input type="checkbox"/> DELETE
NAME	GUNTON, JOHN C.	
STREET ADDRESS	116 HINOTE STREET	
CITY-ST-ZIP	MILTON, FL 00000	

TITLE	D	<input type="checkbox"/> DELETE
NAME	JONES, JAMES	
STREET ADDRESS	5134 PARKWAY DR.	
CITY-ST-ZIP	MILTON, FL 00000	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CARD, ROBERT D	
STREET ADDRESS	5536 WALKER ROAD	
CITY-ST-ZIP	MILTON, FL 00000	

TITLE	P	<input type="checkbox"/> DELETE
NAME	JOHNSON, EDWIN MAC	
STREET ADDRESS	1207 HAMILTON BRIDGE RD	
CITY-ST-ZIP	MILTON, FL 00000	

TITLE	VD	<input type="checkbox"/> DELETE
NAME	BOHANNON, WILLIAM R.	
STREET ADDRESS	313 INDEPENDENCE DR	
CITY-ST-ZIP	MILTON, FL 00000	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Shreve, Rex	
1.3 STREET ADDRESS	6111 Carr Rd.	
1.4 CITY-ST-ZIP	Milton, FL 32583	

2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Kelley, Randal	
4.3 STREET ADDRESS	301 Conecuh Street	
4.4 CITY-ST-ZIP	Milton, FL 32570	

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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.

SIGNATURE: **Sandra B. Mortham** M. JOHNSON

4/7/98 (850) 623-1455

CR2E037 (10/97)