

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762560

FILED
Feb 02, 2005
Secretary of State

Entity Name: UNION BIBLE STUDY ASSOCIATION, INC.

Current Principal Place of Business:

1162 CARMEL CIRCLE
450
CASSELBERRY, FL 32707 US

Current Mailing Address:

11621 CARMEL CIRCLE
450
CASSELBERRY, FL 32707 US

New Principal Place of Business:

1166 CARMEL CIRCLE
220
CASSELBERRY, FL 32707 US

New Mailing Address:

1166 CARMEL CIRCLE
220
CASSELBERRY, FL 32707 US

FEI Number: 59-0838105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENSON, PATRICIA A
1162 CARMEL CIRCLE
#450
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

HENSON, PATRICIA A
1166 CARMEL CIRCLE
220
CASSELBERRY, FL 32707 US

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:

02/02/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CLARK, IRENE C
Address: 1709 WOODY DRIVE
City-St-Zip: WINDERMERE, FL 34786 US

Title: PD () Delete
Name: HENSON, WILMER H
Address: 11204 FANGHORN RD.
City-St-Zip: ORLANDO, FL 32825 US

Title: SD () Delete
Name: IVEY, JUDY A
Address: 451 KENTIA ROAD
City-St-Zip: CASSELBERRY, FL 32707 US

Title: TD () Delete
Name: HENSON, PATRICIA A
Address: 1162 CARMEL CIRCLE #450
City-St-Zip: CASSELBERRY, FL 32707 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: IVEY, JUDY A
Address: 2407 ANTILLES DR
City-St-Zip: WINTER PARK, FL 32792 US

Title: TD (X) Change () Addition
Name: HENSON, PATRICIA A
Address: 1166 CARMEL CIRCLE #220
City-St-Zip: CASSELBERRY, FL 32707 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICIA A HENSON

TD

02/02/2005

Electronic Signature of Signing Officer or Director

Date