

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762560

FILED
Apr 24, 2006
Secretary of State

Entity Name: UNION BIBLE STUDY ASSOCIATION, INC.

Current Principal Place of Business:

1166 CARMEL CIRCLE
220
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

1166 CARMEL CIRCLE
220
CASSELBERRY, FL 32707 US

New Mailing Address:

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
1166 CARMEL CIRCLE
220
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

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: _____

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

04/24/2006

Electronic Signature of Signing Officer or Director

Date