


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 765290</b> 1. Entity Name <b>AMERICAN BIBLE CHURCH, INC.</b>		
Principal Place of Business <b>13821 WATERFRONT DR. PINELAND, FL 33945 US</b>	Mailing Address <b>P. O. BOX 331 PINELAND, FL 33945 US</b>	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent  <b>ROYSE, MARVIN W 13821 WATERFRONT DR PINELAND, FL 33945</b>		
DO NOT WRITE IN THIS SPACE		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	DATE _____
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>ROYSE, MARVIN W 13821 WATERFRONT DR PINELAND, FL</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>ROYSE, KATHY L 13821 WATERFRONT DR PINELAND, FL</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>SHIPLEY, JAMES H 13821 WATERFRONT DR. PINELAND, FL</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <b>BARNETT, RONALD 1003 SHAWNDA LANE KISSIMMEE, FL</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>BARNETT, RONALD 1003 SHAWNDA LA KISSIMMEE, FL</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>HILL, ROBERT 293 CR 14 WATER VALLEY, MS</b>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.		
<b>SIGNATURE:</b> <i>Marvin W. Royse</i> <b>4-18-08</b> <b>239-283-4250</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



04142008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-2393379</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

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05/14/08-80025-005 61.25

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