

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 808404

FILED
Aug 03, 2009
Secretary of State

Entity Name: THE MOODY BIBLE INSTITUTE OF CHICAGO

Current Principal Place of Business:

820 N. LASALLE ST.
CHICAGO, IL 60610

New Principal Place of Business:

Current Mailing Address:

820 N. LASALLE ST.
CHICAGO, IL 60610

New Mailing Address:

FEI Number: 36-2167792 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BINGHAM, MICHAEL
1870 FOREST HILL ROAD
SUITE 205
WEST PALM BEACH, FL 33406 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: EASLEY, MICHAEL J DR.
Address: 712 SO. OAKLAND
City-St-Zip: VILLA PARK, IL 60181

Title: O () Delete
Name: CANNON, EDWARD W
Address: 6 MORGAN COURT
City-St-Zip: BURR RIDGE, IL 60527

Title: O () Delete
Name: DYER, CHARLES H DR.
Address: 6116 76TH AVE.
City-St-Zip: SCHERERVILLE, IN 46375

Title: O () Delete
Name: HEULITT, KEN
Address: 423 N. QUINCY ST.
City-St-Zip: HINSDALE, IL 60521

Title: O () Delete
Name: BLOCKER, WILLIAM
Address: 3607 BEECH STREET
City-St-Zip: FLOSSMOOR, IL 60422

Title: O () Delete
Name: CORNMANN, THOMAS H DR.
Address: 505 SOUTH CHASE
City-St-Zip: WHEATON, IL 60187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: NYQUIST, PAUL DR.
Address: 820 N. LASALLE BLVD.
City-St-Zip: CHICAGO, IL 60610

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

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

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

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

Title: O (X) Change () Addition
Name: OAKLEY, STEPHEN A
Address: 1127 MT. VERNON DRIVE
City-St-Zip: GRAYSLAKE, IL 60030

I hereby certify that the information supplied with this filing does not qualify 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: C. BLAKELY

ASST

08/03/2009

Electronic Signature of Signing Officer or Director

Date