2001 UNIFORM BUSINESS REPORT (UBR)

May 25, 2001 8:00 am: Secretary of State **DOCUMENT # 834018** 1. Entity Name 05-25-2001 90290 012 ****61.25 INSTITUTE IN BASIC LIFE PRINCIPLES, INC. Principal Place of Business Mailing Address BOX ONE BOX ONE OAK BROOK IL 60522-3001 OAK BROOK IL 60522-30(1) 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 36-6108515 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 Zip Code City FL 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. SIGNATURE DATE (NOT: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaig: Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE Change ☐ Delete TITLE HILL, THOMAS A NAME NAME STREET ADDRESS STREET ADDRESS 2643 N.W. 26TH ST. CITY-ST-ZIP CITY-ST-ZIP OKLAHOMA CITY OK Addition ☐ Delete Change TITLE YOUNGBERG, DEAN NAME NAME STREET ADDRESS STREET ADDRESS 7911 DONEGAL CITY-ST-ZIP CITY-ST-ZIP WICHITA KS ☐ Change ☐ Addition TITLE Delete TITLE GOTHARD, WILLIAM JR. NAME NAME 1027 ARLINGTON STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAGRANGE IL CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE BLACKWOOD, ROY NAME NAME 1175 PRINCETON PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ZIONSVILLE IN Addition TITLE Change ☐ Delete TITLE BRANDON, THOMAS S NAME NAME 1012 WESTERN HILLS DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SHERMAN TX Change ☐ Addition IIII E TITLE □ Delete SAMMONS, JAMES A NAME NAME STREET ADDRESS STREET ADDRESS 2630 W. FREEWAY CITY-ST-ZIP FORT WORTH TX CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filing does not qualify to 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 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

SIGNATURE:

SIGNAT



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Institute in **Basic Life Principles**

Box One • Ot k Brook, Illinois 60522-3001 • Telephone: (630) 323-9800 • www.iblp.org

Institute in Basic Life Principles, Inc

Mr. Ben Ziesemer Director of Finance 943 Adams Hinsdale, IL 60521