


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 26, 2004 08:00 AM**  
**Secretary of State**

|  |   |
|--|---|
| DOCUMENT # F00000006042<br>1. Entity Name<br>PRAIRIE BIBLE INSTITUTE (U.S.) INC. |  |
|--|---|

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|--|--|
| Principal Place of Business<br>C/O SNYDER & ASSOCIATES<br>2500, 10123-99TH STREET<br>EDMONTON, AB T5J 1 CA | Mailing Address<br>C/O SNYDER & ASSOCIATES<br>2500, 10123-99TH STREET<br>EDMONTON, AB T5J 1 CA |
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01092004 No Chg-NP CR2E037 (10/03)

|  |                               |
|--|-------------------------------|
| 4. FEI Number<br>95-4278244  | Applied For<br>Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |                               |

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

|   |  |
|---|--|
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2004</b> | 9. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees |
|---|--|


10. OFFICERS AND DIRECTORS

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | S<br>SNYDER, STEPHEN C<br>2500, 10123-99TH STREET<br>EDMONTON, AB T5J 3H1 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | D<br>GALAT, IONE<br>1908 BOLBONES COURT<br>WALNUT CREEK, CA 945952215     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | D<br>MORRIS, JIM<br>1261 SPEARS AVENUE SE<br>SALEM, OR 97302              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |

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01/26/04-80043-004 61.25

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12. I hereby certify that the information supplied with this filing does not qualify 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 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:  STEPHEN C. SNYDER | JANUARY 15, 2004 | (780) 426-4133  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   | Date             | Daytime Phone # |