

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004936

FILED
Jul 22, 2009
Secretary of State

Entity Name: PHILADELPHIA BIBLICAL UNIVERSITY INC

Current Principal Place of Business:

200 MANOR AVENUE
LANGHORNE, PA 190472990

New Principal Place of Business:

Current Mailing Address:

200 MANOR AVENUE
LANGHORNE, PA 190472990

New Mailing Address:

FEI Number: 23-0973290 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:

MACMORAN, CATHERINE
2701 REGENCY OAKS BLVD
APT A402
CLEARWATER, FL 33759 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: C () Delete
Name: BABB, W. SHERRILL DR.
Address: 200 MANOR AVENUE
City-St-Zip: LANGHORNE, PA 190472990

Title: P () Delete
Name: WILLIAMS, TODD DR
Address: 200 MANOR AVENUE
City-St-Zip: LANGHORNE, PA 190472990

Title: V () Delete
Name: KEATING, SCOTT A
Address: 200 MANOR AVENUE
City-St-Zip: LANGHORNE, PA 190472990

Title: V () Delete
Name: HAAS, JAN M
Address: 200 MANOR AVENUE
City-St-Zip: LANGHORNE, PA 190472990

Title: C () Delete
Name: NACE, MELVIN C
Address: 863 BLOOMING GLEN RD
City-St-Zip: PERKASIE, PA 189442703

Title: VC (X) Delete
Name: STAEDTLER, RICHARD
Address: 33 NORTH BRAINTREE COMMON
City-St-Zip: LANGHORNE, PA 19053

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () 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 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: JAN M HAAS

V

07/22/2009

Electronic Signature of Signing Officer or Director

Date