2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 27, 2006 8:00 am Secretary of State DOCUMENT # N00000006202 1. Entity Name 04-27-2006 90154 011 ****70.00 THE CHURCH OF THE HOLY BIBLE (APOSTOLIC), INC. Principal Place of Business Mailing Address 1949 SAN FILIPPO DR SE PALM BAY FL 32909 1601 MORLEY ST SE PALM BAY FL 32909 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-3671199 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name O'MEALLY, COLIN G Street Address (P.O. Box Number is Not Acceptable) 1601 MORLEY ST SE PALM BAY FL 32909 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered pur and the il applicable gistered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 OFFICERS AND DIRECTORS 11. DIRECTOR PD TITLE ☐ Delete TITLE ☐ Change Addition O'MEALLY, COLIN G NAME CLIFTON A. CRANSTON NAME 1601 MORLEY ST SE 1265 ASHBORD CIRCLE S.E. STREET ADDRESS STREET ADDRESS PALM BAY FL 32909 CITY-ST-ZIP CITY-ST-ZIP PALM BAY FL. 32909 SD DIRECTOR Delete TITLE TITLE ☐ Change Addition O'MEALLY, JOYCE E NAME CARLTON SWABY NAME 1800 DALADY ST. N.W. ALM BAY FL. 32907. STREET ADDRESS 1601 MORLEY ST SE STREET ADDRESS PALM BAY FL 32909 CITY-ST-ZIP CITY-ST-ZIP TITLE TD ☐ Delete TITLE ☐ Change ☐ Addition NAME O'MEALLY, COLIN G NAME STREET ADDRESS 1601 MORLEY ST SE STREET ADDRESS PALM BAY FL 32909 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME RAYNOR, BARBARA E NAME 1245 PALM BAY ROAD NE APT O-204 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BAY FL 32905 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition HENRY-DAVIS, ZELMA M NAME 611 AMERICANA BLVD NE STREET ADDRESS STREET ADDRESS PALM BAY FL 32907 CITY-ST-ZIP CITY-ST-ZIP D TITLE Defete Change TITLE ☐ Addition BARNES, VERNICE NAME NAME 1072 TAHITI AVE. SE STREET ADDRESS STREET ADDRESS PALM BAY FL 32909 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

FILED