

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007891

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: BIBLE BELIEVERS OUTREACH INC.

## Current Principal Place of Business:

9835 WOODLAND HILLS WAY  
TALLAHASSEE, FL 32309

## New Principal Place of Business:

## Current Mailing Address:

9835 WOODLAND HILLS WAY  
TALLAHASSEE, FL 32309

## New Mailing Address:

FEI Number: 59-3695772

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WARMACK, TED L  
9835 WOODLAND HILLS WAY  
TALLAHASSEE, FL 32309 US

## Name and Address of New Registered Agent:

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: D ( ) Delete  
Name: WARMACK, TOD L  
Address: 9975 WOODLAND HILLS WAY  
City-St-Zip: TALLAHASSEE, FL 32309

Title: T ( ) Delete  
Name: RICH, KATHERINE  
Address: 2009 SHADY OAKS DR.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete  
Name: WARMACK, TED  
Address: 9835 WOODLAND HILLS WAY  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D ( ) Delete  
Name: DAVIS, STEVE  
Address: 510 WEST TENNESSEE STREET  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: WARMACK, SANDRA  
Address: 9835 WOODLAND HILLS WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: T ( ) Delete  
Name: WESTER, MICHAEL  
Address: 10030 MOCCASIN GAP RD  
City-St-Zip: TALLAHASSEE, FL 32309

## 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: D (X) Change ( ) Addition  
Name: DAVIS, STEVE  
Address: 2106 E. DELLVIEW DR.  
City-St-Zip: TALLAHASSEE, FL 32301

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: TED WARMACK

D

03/30/2009

Electronic Signature of Signing Officer or Director

Date