2002 UNIFORM BUSINESS REPORT (UBR) FILED Apr 16, 2002 8:00 am Secretary of State DOCUMENT # N0100001476 1. Entity Name PRESERVING BIBLE TIMES, INC. 04-16-2002 90152 024 ****61 Principal Place of Business Mailing Address PO BOX 2687 PO BOX 2687 ARMARILLO TX 79105-2687 ARMARILLO TX 79105-2687 HUUDTUAU 2. Principal Place of Business P.O.Box 83 3. Mailing Address 8335 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FE! Number Applied For <u>58-</u>2608783 GaoThers bun Gaithersburg Not Applicable Country \$8.75 Additional Country USA 5. Certificate of Status Desired Q̄O8k3 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TUFTS, T. SCOTT 215 NORTH EOLA DRIVE ORLANDO FL 32801 Zip Code City 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 اللي (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed nar 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition TITLE ☐ Delete TITLE DOUGLAS J. Greenwold BORDINE, BRUCE NAME NAME 2 Bratton CT. 5935 WINKLER MILL STREET ADDRESS STREET ADDRESS Rockville, mp 20850 CITY-ST-ZIP CITY-ST-ZIP **ROCHESTER MI 48306** ☐ Delete ☐ Change **X** Addition TITLE TITLE Steven Holloway BOURNE, ROBERT A NAME NAME 8564 Willow Wisp CT, 1411 VIA TUSCANY STREET ADDRESS STREET ADDRESS 20723 CITY-ST-ZIP aurel WINTER PARK FL 32789 CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE FRALEY, DIXIE JOHNSTON NAME NAME 9218 CROMWELL PARK PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32789 ☐ Change ☐ Addition ☐ Delete TITLE TITLE HERSHISER, OREL NAME NAME 5277 ISLEWORTH CLUNTRY CLUB DR STREET ADDRESS STREET ADDRESS WINDERMERE FL 34786 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MARTIN, JAMES C DR. NAME NAME STREET ADDRESS 2806 S LIPSCOMB STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AMARILLO TX 79109 ☐ Change Addition ☐ Delete TITI F TITLE SNELL, D.J. NAME NAME

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 of the corporation or the receipt

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

RED DOUGLAS AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1101 NORTH KENTUCKY AVE SUITE 100

WINTER PARK FL 32789

greenwold

Daytime Phone #