## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Mar 29, 2004 08:00 AM **DOCUMENT # N01000002212 Secretary of State** 1. Entity Name FT. LAUDERDALE OPEN BIBLE INSTITUTE, INCORPORATED Principal Place of Business Mailing Address 4767 NW 24 CT 4767 NW 24 CT LAUDERDALE LAKES, FL 33313 LAUDERDALE LAKES, FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 01092004 Cha-NP CR2E037 (10/03) City & State City & State Applied For 4. FEI Number 65-0126325 Not Applicable Zlp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAUGH, ALLAN Street Address (P.O. Box Number is Not Acceptable) 4767 NW 24 CT LAUDERDALE LAKES, FL 33313 City Zip Code 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 lamiliar with, and accept 03-22-04 ALLAN BAUGH Signature, typed or printed name of registered age at and title if applicable. SVOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Chance Addition | BAUGH, ALLAN NAME NAME U00000098921 03/29/04-80057-011 70.00 STREET ADDRESS 4871 NW 7 DRIVE STREET ADDRESS CITY-ST-7P PLANTATION, FL 33317 CITY-ST-ZIP TITLE Defete ππε Change Addition NAME CAMPBELL, WINSTON NAME STREET ADDRESS 3360 SPANISH MOSS TERR # 404 STREET ADDRESS CITY-ST-ZP LAUDERHILL, FL 33319 CITY-ST-ZP DILE Delete TITLE Change ☐ Addition NAME ROYES, DAPHNE NUMBE STREET ADDRESS 3365 NW 33 COURT STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33309 CRY-ST-ZIP TITLE TITLE Addition ☐ Defete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70 131Y-57-79 nae Defete TETLE Change ☐ Addition NAME MANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP MILE ☐ Delete TITLE ☐ Change ☐ Addition MAME NAME STREET ADDRESS STRUET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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. ALLAN BAUGH

03-22-04

FILED