

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006081

FILED  
Mar 02, 2006  
Secretary of State

**Entity Name:** SEMINARIO BIBLICO DE FE - FAITH BIBLE SEMINARY, INC.

**Current Principal Place of Business:**

8925 RAMBLEWOOD DR, STE 2507  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

8925 RAMBLEWOOD DR, STE 2507  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

**FEI Number:** 65-1135692

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAY POPE, CORBETT  
8925 RAMBLEWOOD DR, STE 2507  
CORAL SPRINGS, FL 33071 US

**Name and Address of New Registered Agent:**

POPE, CORBETT R  
8925 RAMBLEWOOD DR, STE 2507  
CORAL SPRINGS, FL 33071 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: CORBET RAY POPE

03/02/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: POPE, CORBET RAY  
Address: 8925 RAMBLEWOOD DR, STE 2507  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S ( ) Delete  
Name: SCHWARZ, DR EDWIN  
Address: 6710 BEACH RESORT DR #4  
City-St-Zip: NAPLES, FL 34914

Title: T ( ) Delete  
Name: FERNANDEZ, JESUS  
Address: 1301 SW 142 COURT  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: POPE, ONLY MILTON  
Address: ALVAREZ JONTE 277, RAMOS MEJIA COD, POS1704  
City-St-Zip: PROV BUENOS AIRES ARGENTINA,

Title: D ( ) Delete  
Name: HECKMAN, WARREN L  
Address: 388 LINTNER RD, ( W5895)  
City-St-Zip: PARDEEVILLE, WI 53954

Title: D ( ) Delete  
Name: JOHNSON, CARL V  
Address: 20 GREENRIDGE WAY  
City-St-Zip: SPRING VALLEY, NY 10977

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: POPE, CORBET R  
Address: 8925 RAMBLEWOOD DR, STE 2507  
City-St-Zip: CORAL SPRINGS, FL 33071

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 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: CORBET RAY POPE

PD

03/02/2006

Electronic Signature of Signing Officer or Director

Date