## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006081

FILED Feb 28, 2007 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 8925 RAMBLEWOOD DR, STE 2507 CORAL SPRINGS, FL 33071 **Current Mailing Address: New Mailing Address:** 8925 RAMBLEWOOD DR, STE 2507 CORAL SPRINGS, FL 33071 FEI Number: 65-1135692 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POPE, CORBETT R 8925 RAMBLEWOOD DR, STE 2507 CORAL SPRINGS, FL 33071 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition POPE, CORBET R POPE, CORBETT R Name: Name: 8925 RAMBLEWOOD DR, STE 2507 Address: 8925 RAMBLEWOOD DR, STE 2507 Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33071 Title: ( ) Delete Title: (X) Change ( ) Addition SCHWARZ, DR EDWIN Name: SCHWARZ, DR EDWIN Name: Address: 6710 BEACH RESORT DR #4 Address: 527-1 JOSEPH COURT City-St-Zip: NAPLES, FL 34914 City-St-Zip: NAPLES, FL 34104 Title: () Delete Title: () Change () Addition FERNANDEZ, JESUS Name: Name: Address: 1301 SW 142 COURT Address: City-St-Zip: MIAMI, FL 33184 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: POPE, ONLY MILTON Name: ALVAREZ JONTE 277, RAMOS MEJIA COD, POS1704 Address: Address: City-St-Zip: PROV BUENOS AIRES ARGENTINA, City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition HECKMAN, WARREN L HECKMAN, WARREN L Name: Name: 388 LINTNER RD, (W5895) 21752 HIGLEY LANE Address: Address: City-St-Zip: PARDEEVILLE, WI 53954 City-St-Zip: FRANKFORT, IL 60423 Title: () Delete Title: () Change () Addition JOHNSON, CARL V Name: Name: Address: 20 GREENRIDGE WAY Address: SPRING VALLEY, NY 10977 City-St-Zip: 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: CORBETT RAY POPE PD 02/28/2007