

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006081

FILED
May 18, 2009
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 ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Title: S () Delete
Name: SCHWARZ, DR EDWIN
Address: 527-1 JOSEPH COURT
City-St-Zip: NAPLES, FL 34104

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: 21752 HIGLEY LANE
City-St-Zip: FRANKFORT, IL 60423

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: () 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
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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 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

05/18/2009

Electronic Signature of Signing Officer or Director

Date