

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90278 019 ****61.25

DOCUMENT # N01000006081

1. Entity Name

SEMINARIO BIBLICO DE FE - FAITH BIBLE SEMINARY, INC.



Principal Place of Business

**8925 RAMBLEWOOD DR. STE 2507
CORAL SPRINGS FL 33071**

Mailing Address

**8925 RAMBLEWOOD DR. STE 2507
CORAL SPRINGS FL 33071**

11018732



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1135692**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 familiar with, and accept the obligations of, registered agent.

SIGNATURE

Corbett Ray Pope

(NOTE: Registered Agent signature required when reinstating)

4/24/03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **RAY POPE, CORBETT**
STREET ADDRESS **8925 RAMBLEWOOD DR, STE 2507**
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **SCHWARZ, DR EDWIN**
STREET ADDRESS **6710 BEACH RESORT DR #4**
CITY-ST-ZIP **NAPLES FL 34914**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **FERNANDEZ, JESUS**
STREET ADDRESS **1301 SW 142 CIR**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **POPE, ONLY MILTON**
STREET ADDRESS **ALVAREZ JONTE 277, RAMOS MEJIA COD, POS 1704**
CITY-ST-ZIP **PROV BUENOS AIRES ARGENTINA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **HECKMAN, WARREN L**
STREET ADDRESS **388 LINTNER RD, (W5895)**
CITY-ST-ZIP **PARDEEVILLE WI 53954**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **JOHNSON, CARL V**
STREET ADDRESS **20 GREENRIDGE WAY**
CITY-ST-ZIP **SPRING VALLEY NY 10977**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 changed, or on an attachment with an address, without other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Corbett Ray Pope **4/24/03** **984/345-8691**

CR2E037 (10/02)