

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003131

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: CANON BIBLE COLLEGE, INC.

## Current Principal Place of Business:

5600 WEST COLONIAL DR  
SUITE #105  
ORLANDO, FL 32808

## New Principal Place of Business:

5600 WEST COLONIAL DR  
SUITE 105  
ORLANDO, FL 32808

## Current Mailing Address:

5600 WEST COLONIAL DR  
SUITE #105  
ORLANDO, FL 32808

## New Mailing Address:

FEI Number: 77-0592075      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MALAHOO, LEBERT DR  
5600 WEST COLONIAL DR  
SUITE #105  
ORLANDO, FL 32808 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: P ( ) Delete  
Name: MALAHOO, LEBERT DR  
Address: 5600 WEST COLONIAL DR, SUITE #105  
City-St-Zip: ORLANDO, FL 32808

Title: S ( ) Delete  
Name: MALAHOO, ANDREW  
Address: 5600 WEST COLONIAL DR SUITE #105  
City-St-Zip: ORLANDO, FL 32808

Title: T ( ) Delete  
Name: GRANT, GARY DR  
Address: 5600 WEST COLONIAL DR SUITE #105  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: MERCADO, NATHAN DR  
Address: 5600 WEST COLONIAL DR SUITE #105  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: MALAHOO, HOWARD  
Address: 5600 WEST COLONIAL DR SUITE #105  
City-St-Zip: ORLANDO, FL 32808

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MALAHOO, ANDREW  
Address: 5600 WEST COLONIAL DR SUITE #105  
City-St-Zip: ORLANDO, FL 32808

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 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 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: LEBERT MALAHOO

DR

04/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date