

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004403

FILED
Apr 26, 2005
Secretary of State

Entity Name: BIBLE TEACHERS INTERNATIONAL GLOBAL TRAINING CENTER, INCORPORATED

Current Principal Place of Business:

1000 THOMAS AVE
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

PO BOX 491299
LEESBURG, FL 34749

New Mailing Address:

FEI Number: 65-1054785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, LISA
35346 LAKE UNITY RD
FRUITLAND PARK, FL 34731 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: BANKS, MARY
Address: 525 DOWLING CIRCLE
City-St-Zip: LADY LAKE, FL 32159

Title: V () Delete
Name: THOMAS, MICHAEL
Address: 303 URICK STREET
City-St-Zip: FRUITLAND PARK, FL 34731

Title: T () Delete
Name: THOMPSON, LISA
Address: 35346 LAKE UNITY RD
City-St-Zip: FRUITLAND PARK, FL 34731

Title: S () Delete
Name: BENEBY, PATTY
Address: 209 FOXHILL ROAD
City-St-Zip: FRUITLAND PARK, FL 34731

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
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: LISA THOMPSON

T

04/26/2005

Electronic Signature of Signing Officer or Director

Date