

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

DOCUMENT # N02000005476

1. Entity Name

CANON BIBLE UNIVERSITY, INC.



FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90136 026 ****70.00

Principal Place of Business

2235 MONTE CARLO TRAIL
ORLANDO FL 32805

Mailing Address

P.O. BOX 1172
ORLANDO FL 32802

22000125



☒ CHECK HERE IF MAKING CHANGES

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

59-1658288

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ADAMS, TIM L DR.
2235 MONTE CARLO TRAIL
ORLANDO FL 32805

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01-28-03

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

TITLE D ☐ Delete
NAME MALAHOO, LEBERT DR.
STREET ADDRESS 2235 MONTE CARLO TRAIL
CITY-ST-ZIP ORLANDO FL 32805

TITLE VCD ☐ Delete
NAME ADAMS, TIM L DR.
STREET ADDRESS 2235 MONTE CARLO TRAIL
CITY-ST-ZIP ORLANDO FL 32805

TITLE D-7 ☐ Delete
NAME CORDNER, MERVYN
STREET ADDRESS 2235 MONTE CARLO TRAIL
CITY-ST-ZIP ORLANDO FL 32805

TITLE SCD ☐ Delete
NAME BURNETT, JOHN
STREET ADDRESS 2235 MONTE CARLO TRAIL
CITY-ST-ZIP ORLANDO FL 32805

TITLE D-ADAMS ☐ Delete
NAME VICTOR, R.
STREET ADDRESS 2235 MONTE CARLO TRAIL
CITY-ST-ZIP ORLANDO FL 32805

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE D-TR. ☒ Change ☐ Addition
NAME CORDNER, MERVYN, J. D.
STREET ADDRESS 1025 N. Pine Hills Rd.
CITY-ST-ZIP ORLANDO FL 32805

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

TITLE D ☐ Change ☒ Addition
NAME ADAMS, VICTOR, R.
STREET ADDRESS 2235 MONTE CARLO TRAIL
CITY-ST-ZIP ORLANDO FL 32805

TITLE ☐ Change ☒ Addition
NAME ADAMS, TIMEKA M.
STREET ADDRESS 1025 N. Pine Hills Rd.
CITY-ST-ZIP ORLANDO FL 32805

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-28-03

CR2E037 (10/02)