

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002303

FILED
Apr 27, 2004
Secretary of State**Entity Name:** CENTRAL FLORIDA REGIONAL BIBLE COLLEGE, INC.**Current Principal Place of Business:**601 S. GRANT STREET
LONGWOOD, FL 32750**New Principal Place of Business:****Current Mailing Address:**601 S. GRANT STREET
LONGWOOD, FL 32750**New Mailing Address:****FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WEBB, PATRICIA L
601 S. GRANT STREET
LONGWOOD, FL 32750**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: WEBB, JOSEPH A PH.D.
Address: 601 S. GRANT STREET
City-St-Zip: LONGWOOD, FL 32750

Title: TD (X) Delete
Name: WARE, EDWARD M
Address: 131 E. FLOYD AVENUE
City-St-Zip: LAKE MARY, FL 32746

Title: VD (X) Delete
Name: STRINGER, SUZANNE E
Address: 1818 PALOMA AVE
City-St-Zip: SANFORD, FL 32771

Title: VD () Delete
Name: LANE WEBB, PATRICIA PH.D.
Address: 601 S. GRANT STREET
City-St-Zip: LONGWOOD, FL 32750

Title: VD (X) Delete
Name: WARE, YVONNE M
Address: 131 E. FLOYD AVENUE
City-St-Zip: LAKE MARY, FL 32746

Title: SD (X) Delete
Name: HANER, MAUREEN A PH.D.
Address: 103 SAN PEBBLE PL.
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WEBB, JOSEPH A TH.D.
Address: 601 S. GRANT STREET
City-St-Zip: LONGWOOD, FL 32750

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

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

Title: VSD (X) Change () Addition
Name: LANE WEBB, PATRICIA PH.D.
Address: 601 S. GRANT STREET
City-St-Zip: LONGWOOD, FL 32750

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: PATRICIA L. WEBB

SECY

04/27/2004

Electronic Signature of Signing Officer or Director

Date