2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State
01-31-2008 90021 020 ****70.00

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1. Entity Name
CITY OF REFUGE BIBLE CENTER, INC.

66002152

Principal Place of Business	Mailing Address
6462 GREENWELL ST PENSACOLA, FL 32526	6462 GREENWELL ST PENSACOLA, FL 32526

01132008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
614 MUSCOGEE RD	PO BOX 7532
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CANTONMENT FL	City & State: PENSACOLA FL
Zip: 32533 Country: USA	Zip: 32534 Country: USA

4. FEI Number 27-0019455 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BOLDEN, JEFFERY III 6462 GREENWELL ST PENSACOLA, FL 32526	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P BOLDEN, JEFFERY III 6462 GREENWELL ST PENSACOLA, FL 32526	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BOLDEN JEFFERY 614 MUSCOGEE RD CANTONMENT FL 32533	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BOLDEN, WANDA F 6462 GREENWELL ST PENSACOLA, FL 32526	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BOLDEN WANDA F 614 MUSCOGEE RD CANTONMENT FL 32533	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FS HARRIS, BARBARA 6462 GREENWELL ST PENSACOLA, FL 32526	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FS HARRIS BARBARA 614 MUSCOGEE RD CANTONMENT FL 32533	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT JOHNSON, FRANCES 6462 GREENWELL ST PENSACOLA, FL 32526	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JOHNSON FRANCES 614 MUSCOGEE RD CANTONMENT FL 32533	☒ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: J Jeffery Bolden III 3-1-08 850-944-5711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #