

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011650

FILED
Jul 03, 2009
Secretary of State

Entity Name: BIBLE TEACHERS INTERNATIONAL-BELLE GLADE, INC.

Current Principal Place of Business:

1516 SW MARTIN LUTHER KING BLVD
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2702
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JOHNSON, ROBERT
1516 SW MARTIN LUTHER KING BLVD
BELLE GLADE, FL 33430 US

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: 1112 HIDDEN SPIRIT TRAIL
City-St-Zip: LAWRENCEVILLE, FA 30045

Title: V () Delete
Name: THOMAS, MICHAEL
Address: 525 DOWLING CIRCLE
City-St-Zip: LADY LAKE, FL 32159

Title: S () Delete
Name: CARTER, VAL
Address: 733 FLEMING DRIVE
City-St-Zip: BELLE GLADE, FL 33430

Title: T () Delete
Name: JOHNSON, ROBERT
Address: 195 NW 12TH AVE.
City-St-Zip: SOUTH BAY, FL 33493

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 exemption stated 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 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: ROBERT JOHNSON

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07/03/2009

Electronic Signature of Signing Officer or Director

Date