

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000517

FILED
Apr 14, 2009
Secretary of State

Entity Name: LIBERTY BIBLE COLLEGE 2C317, CORPORATION

Current Principal Place of Business:

32 METHODIST STREET
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

80 MIRACLE STRIP PARKWAY, SE
FORT WALTON BEACH, FL 32548 US

Current Mailing Address:

POST OFFICE BOX 218
FORT WALTON BEACH, FL 32549 US

New Mailing Address:

FEI Number: 26-1582467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REED, MAXINE C
8887 CAGLE DRIVE
NAVARRE, FL 32566 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: REED, MAXINE C
Address: 8887 CAGLE DRIVE
City-St-Zip: NAVARRE, FL 32566 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O () Change (X) Addition
Name: REED, MARK A
Address: 8887 CAGLE DRIVE
City-St-Zip: NAVARRE, FL 32566 US

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: MAXINE C. REED

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date