

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 19 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N39384

(5)

1. Corporation Name

SPECIAL BIBLE MINISTRIES, INC.

Principal Place of Business

Mailing Address

% GLEN D. MILLER
2506 E 9TH CIR
PANAMA CITY FL 32401
US

% GLEN D. MILLER
2506 E 9TH CIR
PANAMA CITY FL 32401
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/09/1990

3a. Date of Last Report

04/14/1994

4. FEI Number

58-1817834

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 129 SAUSAGE LANE

27 129 SAUSAGE LANE

City & State

City & State

23 WEST COLUMBIA, SC

28 WEST COLUMBIA, SC

24

Country

29

Country

25 29170

30 29170

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, GLEN D.
2506 E 9TH CIR
PANAMA CITY FL 32401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1701 EAST AVENUE

83

84

PANAMA CITY

FL

85 Zip Code

32405

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: GLEN D. MILLER, PRES.

Glen D. Miller

4-13-95

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	MILLER, GLEN D.
STREET ADDRESS	2506 E 9TH CIR
CITY - ST - ZIP	PANAMA CITY FL
TITLE	SD
NAME	MILLER, SANDRA N.
STREET ADDRESS	2506 E 9TH CIR
CITY - ST - ZIP	PANAMA CITY FL
TITLE	D
NAME	ELLIOTT, JOHN
STREET ADDRESS	7801 BURNS ST.
CITY - ST - ZIP	HITCHCOCK TX
TITLE	VP
NAME	SHEDO, CHARLES
STREET ADDRESS	202 RAILROAD ST
CITY - ST - ZIP	SPRINGFIELD GA
TITLE	D
NAME	OGG, JEFFREY A
STREET ADDRESS	8936 SASSAFRAS
CITY - ST - ZIP	BATON ROUGE LA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	129 SAUSAGE LANE
1.4 CITY - ST - ZIP	WEST COLUMBIA, SC 29170
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	129 SAUSAGE LANE
2.4 CITY - ST - ZIP	WEST COLUMBIA, SC 29170
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GLEN D. MILLER, PRES.

Glen D. Miller

4-13-95 (803) 356-3793

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #