

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40660

FILED
Apr 05, 2007
Secretary of State

Entity Name: FLORIDA STUDENTS OF THE URANTIA BOOK INC.

Current Principal Place of Business:

705 S. 8TH STREET
FORT PIERCE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

705 S. 8TH STREET
FORT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 59-3035623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIEL, AMYX
705 S. 8TH STREET
FORT PIERCE, FL 34950 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: VP () Delete
Name: LINDSTROM, JOYCEE
Address: 4TH STREET
City-St-Zip: ST. PETE, FL 33474

Title: T () Delete
Name: RICH, BRAD
Address: 1790 N MERRIMAC DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: PD () Delete
Name: AMYX, DANIEL A PRES
Address: 705 S. 8TH STREET
City-St-Zip: FORT PIERCE, FL 34950

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: BEDELL, JENNI
Address: 3309 W. PALMIRA
City-St-Zip: TAMPA, FL 33629

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

Title: T () Change (X) Addition
Name: DEOTO, GUILLERMO
Address: 10146 STONEHENGE CIR.
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL A. AMYX

PD

04/05/2007

Electronic Signature of Signing Officer or Director

Date