2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 18, 2007 08:00 AM Secretary of State DOCUMENT # N42326 1.*Entity Namo OPEN BIBLE ASSEMBLY OF GOD, INC. Principal Place of Business Mailing Address 211 KANSAS AVE FORT LAUDERDALE FL 33312-1862 259 SW 27 AVENUE FT LAUDERDALE FL 33312 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEI Number 65-0261508 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired \Box 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name EGNER, THEODORE K Street Address (P.O. Box Number is Not Acceptable) 3067 E COMMERCIAL BLVD SUITE 203 FORT LAUDERDALE FL 33308 Zıp Coda 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) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution, Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change Addition IIIL PD Delete THE NAME NAME BLAKE, TERVIL A. 000000715522 04/27/07-80064-013 61.25 STREET ADDRESS STREET ADDRESS 211 KANSAS AVE CITY-ST-ZIP CITY-SI-ZIP FT LAUDERDALE FL ☐ Change Delete Addition TITLE ۷D IIII NAME NAME HEWITT, DERRIK STREET ADDRESS 40211 KANSAS AVE STREELADDRESS CITY-S1-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33312 Addition Delete TITLE TITLE STD NAME NAME BRYAN, RUBY STREET ADDRESS STREET ADORGSS 3492 NW 37 AVE CITY-ST-ZIP CITY-ST-ZIP LAUDERDALE LAKES FL Addition ☐ Change ☐ Defete IIII IIIŒ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 offect as if made under earl; 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:

4-15-07
