

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49014

FILED
Apr 29, 2009
Secretary of State

Entity Name: FAMILY BIBLE CHURCH, INC.

Current Principal Place of Business:

1 NORTH PRESCOTT ST.
EUSTIS, FL 32726 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 840
EUSTIS, FL 32727 US

New Mailing Address:

FEI Number: 59-3126530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEEGLE, ALLEN
1 NORTH PRESCOTT ST.
EUSTIS, FL 32726 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: PD () Delete
Name: SPEEGLE, ALLEN
Address: 1 NORTH PRESCOTT ST.
City-St-Zip: EUSTIS, FL 32726

Title: DTS () Delete
Name: FRERKING, DAVID
Address: 30825 CYPRESS DR.
City-St-Zip: TAVARES, FL 32778

Title: VD () Delete
Name: RIGGAN, JACK
Address: 714 N TREMAIN STREET
City-St-Zip: MT. DORA, FL 32757

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:

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: ALLEN SPEEGLE

PD

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date