

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 01, 2009  
Secretary of State

DOCUMENT# N93000005102

Entity Name: VISION CHRISTIAN BIBLE COLLEGE, INC.

## Current Principal Place of Business:

200 E WASHINGTON ST  
MINNEOLA, FL 34715

## New Principal Place of Business:

185 N HWY 27  
SUITE B  
CLERMONT, FL 34711

## Current Mailing Address:

PO BOX 121064  
CLERMONT, FL 34712

## New Mailing Address:

FEI Number: 34-1711102      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

GARBER, JAN L  
1008 SINGLETON CR.  
GROVELAND, FL 34736      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: D      ( ) Delete  
Name: GARBER, JAN L  
Address: 1008 SINGLETON CR.  
City-St-Zip: GROVELAND, FL 34736

Title: D      ( ) Delete  
Name: ANDERSON, RALPH D  
Address: PO BOX 683425  
City-St-Zip: ORLANDO, FL 32868

Title: D      ( ) Delete  
Name: GARBER, CAROLINE S  
Address: 1008 SINGLETON CR.  
City-St-Zip: GROVELAND, FL 34736

Title: D      ( ) Delete  
Name: STRICKLAND, H G  
Address: 22160 SWITZER RD  
City-St-Zip: DRFIANCE, OH 34719

Title: D      ( ) Delete  
Name: RON, KING  
Address: 326 HARGRAVE RD  
City-St-Zip: TOLEDO, OH 43615

Title: D      ( ) Delete  
Name: ARNIE, BLAKLEY D  
Address: PO BOX 120627  
City-St-Zip: CLERMONT, FL 34712

## 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:

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: JAN L GARBER

D

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date