


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2005 08:00 AM
Secretary of State

DOCUMENT # N94000000349	
1. Entity Name OSCEOLA BIBLE CHAPEL, INC.	

Principal Place of Business 4135 BERGAMONT COURT K KISSIMMEE, FL 34746	Mailing Address 4135 BERGAMONT COURT K KISSIMMEE, FL 34746
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03062005 No Chg-NP CR2E037 (10/03)

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4. FEI Number 59-3227823	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**PLETT, LESLIE P
C/O DONALD E LEPIC
4135 BERGAMONT COURT
KISSIMMEE, FL 34746**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLETT, LESLIE P 6 WISCONSIN AVE. SAINT CLOUD, FL 34769
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEPIC, DONALD E 4135 BERGAMONT CT. KISSIMMEE, FL 34746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MYERS, BRYAN D 1050 HERON CT POINCIANA, FL 34759
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/09/05-80022-005 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **DONALD E. LEPIC** **3/7/05** **407 343-2624**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #