

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2007 08:00 A
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**



02062007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3227823

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LEPIC, DONALD E
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
D
NAME
PLETT, LESLIE P
STREET ADDRESS
6 WISCONSIN AVE.
CITY-ST-ZIP
SAINT CLOUD, FL 34769

TITLE
TD
NAME
LEPIC, DONALD E
STREET ADDRESS
4135 BERGAMONT CT.
CITY-ST-ZIP
KISSIMMEE, FL 34746

TITLE
CD
NAME
MCCOY, TERRY
STREET ADDRESS
4229 POPLAR WAY
CITY-ST-ZIP
KISSIMMEE, FL 34746

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000667819
03/27/07-80003-019-61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

DONALD E. LEPIC

3/2/07

(407) 343-2624

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #