## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # N9400003275 1. Corporation Name

INTERNATIONAL BIBLE UNIVERSITY, INC.

Principal Place of Bus
2255 GREENVIEW CR
ORLANDO EL 32808

Mailing Address

## **FILED** Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90058 012 \*\*\*\*75.00

	255 Greenview Cr Rlando FL 32808			0 BOX 585011 RLANDO FL 32808					
2.	Principal Place of I	Business	2a.	Mailing Address	- 11 <del>2</del> in - 1	n•	3. Date Incorporated or Qualifed 07/01/1994		
22	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			4. FEI Number 59-3333937	Applied For Not Applicable	
23	City & State		28	City & State			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
24	Zip	Country 25	29	Zip	Country 30	/	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
	9. N	ame and Address of Cur	τent Regis	tered Agent		1	10. Name and Address of New Registered	Agent	
GHUZMAN, ROSA 2255 GREENVIEW CR ORLANDO FL 32808				81 82 83	Street Ac	dress (P.O. Box Number is Not Acceptable)			
1	<ul> <li>office or registere</li> </ul>	d agent, or both, in the Sta	ate of Florid	la. Such change was	s authorized by	e-named co	FL orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appoint	ntment as registered	
	agent. I am famili	ar with, and accept the ob	ligations of,	Section 617.0503, F	Florida Statute:	3.	100 · 100 · 200 ·	相關 化焊 化矿 化工具 新的 经市	

SIGNATURE				<u> </u>		·	
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Re	sistered Agent signature required		DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES	TO OFFICERS AN		
TITLE	D	DELETE	1.1 TITLE	47 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		☐ Change	Addition
NAME	DE PARIS, DR. ANTONIO		1.2 NAME	v			
STREET ADDRESS	228 SORRENTO CIRCLE		1.3 STREET ADDRESS			•	
CITY-ST-ZIP	WINTER PARK FL 32792		1.4 CITY-ST-ZIP	•			
TITLE	D/S	DELETE	2.1 TITLE			Change	☐ Addition
NAME	REYES, DR. ANA J		2.2 NAME			• •	
STREET ADDRESS	12301 CORIANDER DRIVE		2.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32837		2.4 CITY-ST-ZIP				
TITLE	D	DELETE	3.1 TITLE			Change	☐ Addition
NAME CONTRACTOR	DE PARIS, NAOEMI		3.2 NAME			•	
STREET ADDRESS	228 SORRENTO CIRCLE		3.3 STREET ADDRESS		· ·		
CITY ST-ZIP	WINTER: PARK FL 32792-1145		3.4. CITY-ST-ZIP	<u> </u>		•	
TITLE	P	DELETE	4.1 TITLE		•	☐ Change	☐ Addition
NAME	GUZMAN, JULIO REV		4. 2 NAME	41	1 197 - 154 - 176 - 338	erione i Villia	11.4.254
STREET ADDRESS	2255 GREENVIEW CR		4.3 STREET ADDRESS			台灣語文	
CITY-ST-ZIP	ORLANDO FL 32808		4.4 CITY-ST-ZIP		1 12 149 1647	羅子科科。	पेड्रोडिस इ.स.
TITLE		DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME		•		
STREET ADDRESS	0		5.3 STREET ADDRESS	4			
CITY-ST-ZIP	0		5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE		• • •	Change	Addition
NAME	28 03 U.S.		6.2 NAME		•		
STREET ADDRESS	Read to the second of the seco		6.3 STREET ADDRESS			:	
CITY-ST-ZIP	1.5		6.4 CITY-ST-ZIP		•		

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an addressy with all other like empowered.

1-30-99.