

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001758

FILED
Jul 07, 2008
Secretary of State

Entity Name: SONSHINE BIBLE COLLEGE, INC.

Current Principal Place of Business:

5746 MARLIN ROAD
SUITE 500
CHATTANOOGA, TN 37411

New Principal Place of Business:

Current Mailing Address:

2707 MAIN STREET
SAYREVILLE, NJ 08872

New Mailing Address:

FEI Number: 65-0736004 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:

DEMOLA, DAVID T
6111 SOUTH POINT BLVD.
FT MYERS, FL 33919 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: DEMOLA, DAVID T
Address: 6111 SOUTH POINT BLVD.
City-St-Zip: FT MYERS, FL 33919

Title: D () Delete
Name: HANEY, PHILIP S
Address: 1437 S. BOULDER, STE. 1050
City-St-Zip: TULSA, OK 741193616

Title: TD () Delete
Name: CHITWOOD, H. MICHAEL
Address: 5746 MARLIN RD SUITE 500
City-St-Zip: CHATTANOOGA, TN 374114009

Title: S () Delete
Name: NATALE, ELIO
Address: 6111 SOUTH POINT BLVD.
City-St-Zip: FT MYERS, FL 33919

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:

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: ELIO S NATALE

S

07/07/2008

Electronic Signature of Signing Officer or Director

Date