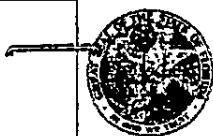


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # N98000000900

1. Entity Name
LIGHT FROM THE BIBLE MINISTRIES, INC.



Principal Place of Business
1410 17TH STREET, S.W.
NAPLES, FL 34117

Mailing Address
1410 17TH STREET, S.W.
NAPLES, FL 34117



01162008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3492957

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SIMS, ARTHUR
1410 17TH STREET, S.W.
NAPLES, FL 34117

**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 reissuing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SIMS, ARTHUR
STREET ADDRESS 1410 17TH STREET, S.W.
CITY-ST-ZIP NAPLES, FL 34117

TITLE TD
NAME SIMS, BETTY JOE
STREET ADDRESS 1410 17TH STREET, S.W.
CITY-ST-ZIP NAPLES, FL 34117

TITLE SD
NAME DUNSTAN, SHARON
STREET ADDRESS 6015 HARDROCK CIR
CITY-ST-ZIP ORLANDO, FL 32819

TITLE D
NAME FORBES, LAMAR
STREET ADDRESS 2350 PRESTON AVENUE
CITY-ST-ZIP SEBRING, FL 33872

TITLE D
NAME GIBSON, DEBRA
STREET ADDRESS 12833 STILLWOOD DRIVE
CITY-ST-ZIP SAVANNAH, GA 32419

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

ARTHUR SIMS, PRESIDENT

1-15-08

239-352-4977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #