

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 10, 2004 8:00 am**  
**Secretary of State**

02-10-2004 90005 021 \*\*\*\*70.00

**DOCUMENT # N98000003256**

1. Entity Name

BIBLE MATERIAL UNLIMITED, INC.



Principal Place of Business

6201 29TH AVE. NORTH  
ST. PETERSBURG FL 33710-3207

Mailing Address

6201 29TH AVE. NORTH  
ST. PETERSBURG FL 33710-3207

2. Principal Place of Business

6201-29-AVE N

3. Mailing Address

6201-29-AVE N

Suite, Apt. #, etc.

Suite, Apt. #, etc.



MOORE

CR2E037 (11/03)

City & State

ST PETERSBURG FL

City & State

ST PETERSBURG FL

4. FEI Number

65-0849233

Applied For

Not Applicable

Zip

33710-3207

Country

PINELLAS

Zip

33710-3207

Country

PINELLAS

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRAUCHT, JOHN W  
6201 29 AVE NO  
SAINT PETERSBURG FL 33710

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

JOHN W BRAUCHT

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: POMD  
NAME: GRAUCHT, JOHN W  
STREET ADDRESS: 6201 29TH AVE. NORTH  
CITY-ST-ZIP: ST. PETERSBURG FL 33710-3207  
*MISS. PYPING*

TITLE: VPD  
NAME: WINTERS, ELWOOD  
STREET ADDRESS: 8733 CORTEZ RD.  
CITY-ST-ZIP: SEBRING FL 33870-8086

TITLE: TD  
NAME: BRAUCHT, LUELA D  
STREET ADDRESS: 6201 29TH AVE. NORTH  
CITY-ST-ZIP: ST. PETERSBURG FL 33710-3207

TITLE: V  
NAME: HARTER, TOM  
STREET ADDRESS: 8637 SW 108 LANE RD  
CITY-ST-ZIP: OCALA FL 34481-5381

TITLE: POMP  
NAME: BRAUCHT, JOHN W  
STREET ADDRESS: 6201-29 AVE NORTH  
CITY-ST-ZIP: SAINT PETERSBURG FL 33710

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: POMD  
NAME: BRAUCHT  
STREET ADDRESS:   
CITY-ST-ZIP:   
☒ Change ☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
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CITY-ST-ZIP:   
☐ Change ☐ Addition

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:

JOHN W BRAUCHT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAN 27-04 727-347-2051