

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005797

**FILED**  
**May 01, 2004**  
**Secretary of State**

**Entity Name:** MISSIONARY BIBLE TABERNACLE, INC.

**Current Principal Place of Business:**

9360 NW 40TH COURT  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

9360 NW 40TH COURT  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:** 65-0950751      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARPER, LOVELL  
9360 NW 40TH COURT  
SUNRISE, FL 33351      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: D      ( ) Delete  
Name: HARPER, LOVELL  
Address: 9360 NW 40TH COURT  
City-St-Zip: SUNRISE, FL 33351

Title: TT      ( ) Delete  
Name: HUNTER, MAXWELL JR.  
Address: 230 NE 13TH AVENUE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: ST      ( ) Delete  
Name: HUNTER, CAROLYN  
Address: 17189 92ND LANE N.  
City-St-Zip: LOXAHACHEE, FL 33470

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LOVELL HARPER

Electronic Signature of Signing Officer or Director

DIR

05/01/2004

Date