

2000 UNIFORM BUSINESS REPORT (UBR)

87

FILED
Aug 31, 2000 8:00 am
Secretary of State

08-23-2000 90001 004 ****61.25

DOCUMENT # N99000007059

1. Entity Name

FRIENDS OF ISRAEL COLLEGE OF THE BIBLE, INC.

R

Principal Place of Business

8001 EASTWOOD LANE
 PENASCOLA FL 32514

Mailing Address

8001 EASTWOOD LANE
 PENASCOLA FL 32514

2. Principal Place of Business

Pensacola, FL

3. Mailing Address

8001 Eastwood Ln.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pensacola, FL

City & State

Pensacola, FL

4. FEI Number

59-361-7939

Applied For

Not Applicable

Zip

32514

Country

USA

Zip

32514

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional

Fees Required.

6. Name and Address of Current Registered Agent

DORRIS, DAVID
 8001 EASTWOOD LANE
 PENASCOLA FL 32514

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.

SIGNATURE

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
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

| | | |
|----------------|--|---------------------------------|
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | | |
|----------------|----------|--------------------------------|--|
| TITLE | <u>D</u> | <u>President Iton Zahir</u> | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | | <u>P.O. Box 32145</u> | |
| STREET ADDRESS | | <u>Jerusalem, Israel 91320</u> | |
| CITY-ST-ZIP | | | |
| TITLE | <u>D</u> | <u>V.P. Marty Melvin</u> | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | | <u>8219 Denver St</u> | |
| STREET ADDRESS | | <u>Ventura, CA 93004</u> | |
| CITY-ST-ZIP | | | |
| TITLE | <u>D</u> | <u>Sec/Treas. David Dorris</u> | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | | <u>8001 Eastwood Ln.</u> | |
| STREET ADDRESS | | <u>Pensacola, FL 32514</u> | |
| CITY-ST-ZIP | | | |
| TITLE | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

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 supplement 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:

SIGNATURE OF REGISTERED AGENT
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/22/00

Date

850-458-6787

Daytime Phone

CR2E037 (5/00)