2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08845

FILED Mar 10, 2004 Secretary of State

Entity Name: CINCINNATI BIBLE COLLEGE & SEMINARY, INC.

Current Principal Place of Business: New Principal Place of Business: 2700 GLENWAY AVENUE CINCINNATI, OH 452041738 **Current Mailing Address: New Mailing Address:** 2700 GLENWAY AVENUE CINCINNATI, OH 452041738 FEI Number: 31-0643552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEPPER, ROSS FIRST CHRISTIAN CHURCH 415 NORTH MAIN STREET KISSIMMEE, FL 32743 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition RAUCH, EDWARD J RAUCH, EDWARD J Name: Name: 5126 BIRCHWOOD FARMS DR Address: 6133 BRIDGEWATER CT Address: City-St-Zip: MASON, OH City-St-Zip: MASON, OH 45040 Title: CFO () Delete Title: () Change () Addition Name: DEVINE, RICHARD W Name: Address: 7043 PADDISION RD. Address: City-St-Zip: CINCINNATI, OH City-St-Zip: Title: () Delete Title: () Change () Addition KOERNER, MARK Name: Name: 4729 HUBBLE ROAD Address: Address: City-St-Zip: CINCINNATI, OH City-St-Zip: () Delete Title: CD Title: () Change () Addition Name: HALE, DAVID, Name: 200 WEST BROADWAY Address: Address: City-St-Zip: LOUISVILLE, KY City-St-Zip: Title: () Delete Title: () Change () Addition FAUST, DAVID Name: Name: 4549 HUTCHINSON GLEN Address: Address: City-St-Zip: CINCINNATI, OH 45248 City-St-Zip: Title: () Delete Title: () Change () Addition WEBER, WILLIAM Name: Name: Address: 5467 FOX ROAD Address: CINCINNATI, OH 45239 City-St-Zip: 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: RICHARD W. DEVINE MR 03/10/2004