2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Secretary of State DOCUMENT # P08845 01-22-2003 90151 048 ****61.25 CINCINNATI BIBLE COLLEGE & SEMINARY, INC. Mailing Address Principal Place of Business 2700 GLENWAY AVENUE 2700 GLENWAY AVENUE CINCINNATI OH 45204-1738 CINCINNATI OH 45204-1738 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 31-0643552 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PEPPER, ROSS Street Address (P.O. Box Number is Not Acceptable) FIRST CHRISTIAN CHURCH 415 NORTH MAIN STREET KISSIMMEE FL 32743 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VS Addition FAUST, DAVID ☐ Change TITLE ☐ Delete TITLE RAUCH, EDWARD J 4549 Hutchelson GIEN NAME NAME STREET ADDRESS 5126 BIRCHWOOD FARMS DR STREET ADDRESS Circullati Oh 45248 CITY-ST-ZIP CITY-ST-ZIP MASON OH CF0 ☐ Change ☐ Delete TITLE Addition TITLE DÉVINE, RICHARD W NAME NAME STREET ADDRESS 7043 PADDISION RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CINCINNATI OH ☐ Delete ☐ Addition TITLE TITLE ☐ Change KOERNER, MARK NAME NAME 4729 HUBBLE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CINCINNATI OH CD ☐ Change Addition TITLE ☐ Delete TITLE HALE, DAVID NAME NAME STREET ADDRESS 200 WEST BROADWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LOUISVILLE KY Delete TITLE TITLE ☐ Change ☐ Addition GRUBBS, DAVID NAME NAME STREET ADORESS 160 DAHLIA STREET ADDRESS CITY-ST-ZIP CINCINNATI OH CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE WEBER, WILLIAM NAME NAME STREET ADDRESS 5467 FOX ROAD STREET ADDRESS

FILED

Jan 22, 2003 8:00 am

2. 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 of 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 exercise 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 alrachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CINCINNATI OH 45239

CITY-ST-ZIP

REPEQUIREDRIGARO NDEVINE 01/10/03 513-244-813