FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P11098** **(1)**

1. Corporation Name

BIBLE BASICS INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
13042 TARPON SPRINGS RD ODESSA FL 33556 US	P O BOX 340608 ~~54 IRONIA RD~~ OMIT ~~TAMPA~~ FL 33694 US

3. Date Incorporated or Qualified: 08/13/1986	3a. Date of Last Report: 06/20/1995
4. FEI Number: 23-7328667	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28: TAMPA FL
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

PRIDDY, REV. EUGENE
13042 TARPON SPGS. ROAD
ODESSA FL 33556

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PRIDDY, REV. EUGENE 4218 SUMMERDALE DRIVE TAMPA FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HERTZOG, REV. ROY 2721 ANDREA DRIVE ALLENTOWN PA	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KISER, ELIZABETH 54 IRONIA RD MENDHAM NJ	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BERRY, JOHN ~~9100 GROSSE POINT E BLVD~~ ~~TAMPA FL~~	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	250 WEBB ROAD LEXINGTON, NC 27292	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KRAUSS, CHARLES 3327 CROAKER DRIVE ~~HERNANDO BEACH FL~~	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	HERNANDO BEACH, FL 34607	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROBINSON, FRANK 178 COLD SPRING ROAD ~~SYOSSET NY~~	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	SYOSSET, NY 11791	☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Eugene Priddy EUGENE PRIDDY, PRESIDENT 1/20/96 (813) 920-2264
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)

FLORIDA DEPARTMENT OF STATE
NONPROFIT CORPORATION ANNUAL REPORT - 1996

BIBLE BASICS INTERNATIONAL (INC.)
DOCUMENT #P11098

BOX 13
ADDITIONAL BOARD MEMBER:

TITLE	D	☐ Change	☒ Addition
NAME	MEISTER, REV. HERMAN		
STREET ADDRESS	15107 LAUREL COVE CIRCLE		
CITY- ST-ZIP	ODESSA, FL 33556		