# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 19, 2007 08:00 AM**
**Secretary of State**

DOCUMENT # P11098

1. Entity Name
BIBLE BASICS INTERNATIONAL, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 13042 TARPON SPRINGS RD<br>ODESSA, FL 33556 US | P.O. BOX 726<br>ODESSA, FL 33556-0726 US |

02142007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number
23-7328667
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE IN THIS SPACE**

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)

**Filing Fee is $61.25**
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | PD |
| NAME | PRIDDY, REV. EUGENE |
| STREET ADDRESS | 3526 TEESIDE DR |
| CITY-ST-ZIP | NEW PORT RICHEY, FL 34655 |
| TITLE | TD |
| NAME | ROBINSON, FRANK REV |
| STREET ADDRESS | POINT BRITTANY 508/5, 5220 BRITTANY DRS |
| CITY-ST-ZIP | SAINT PETERSBURG, FL 33715 |
| TITLE | VD |
| NAME | MEISTER, HERMAN |
| STREET ADDRESS | 15107 LAUREL COVE CIR |
| CITY-ST-ZIP | ODESSA, FL 33556 |
| TITLE | SD |
| NAME | PRIDDY, GLENN REV. |
| STREET ADDRESS | 520 LEWISBERRY RD. |
| CITY-ST-ZIP | NEW CUMBERLAND, PA 17070 |
| TITLE | D |
| NAME | MITTEN, JOHN R |
| STREET ADDRESS | 24043 TWISTER LN |
| CITY-ST-ZIP | BROOKSVILLE, FL 346029181 |
| TITLE | D |
| NAME | OLSON, GORDON DR |
| STREET ADDRESS | 74 MOUNTAIN AVE |
| CITY-ST-ZIP | CEDAR KNOLLS, NJ 079271215 |

U00000641762
03/01/07-80013-007 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or 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 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:** Eugene Priddy 2/15/07 813-920-2264
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #