## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P11098

FILED Apr 20, 2009 Secretary of State

Entity Name: BIBLE BASICS INTERNATIONAL, INC.

**Current Principal Place of Business: New Principal Place of Business:** 13042 TARPON SPRINGS RD ODESSA, FL 33556 **Current Mailing Address: New Mailing Address:** P.O. BOX 726 ODESSA, FL 335560726 US FEI Number: 23-7328667 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PRIDDY, REV. EUGENE PRIDDY, EUGENE A PRES 13042 TÁRPON SPGS. ROAD 13042 TÁRPON SPGS. ROAD ODESSA, FL 33556 ODESSA, FL 33556 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: EUGENE PRIDDY 04/20/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PRIDDY, REV. EUGENE Name: Name: 3526 TEESIDE DR Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: Title: () Delete Title: () Change () Addition ROBINSON, FRANK REV Name: Name: Address: POINT BRITTANY 508/5, 5220 BRITTANY DRS Address: City-St-Zip: SAINT PETERSBURG, FL 33715 City-St-Zip: Title: VD. () Delete Title: () Change () Addition MEISTER, HERMAN Name: Name: 15107 LAUREL COVE CIR Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: PRIDDY, GLENN REV. Name: Address: 520 LEWISBERRY RD. Address: City-St-Zip: NEW CUMBERLAND, PA 17070 City-St-Zip: Title: () Delete Title: () Change () Addition MITTEN, JOHN R Name: Name: 24043 TWISTER LN Address: Address: City-St-Zip: BROOKSVILLE, FL 346029181 City-St-Zip: Title: () Delete Title: () Change () Addition DORSEY, DAVID Name: Name: Address: 19424 WEYMOUTH DR Address: LAND O LAKES, FL 346391476 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EUGENE PRIDDY PD 04/20/2009