

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 834018

Entity Name: INSTITUTE IN BASIC LIFE PRINCIPLES, INC.**Current Principal Place of Business:**707 W OGDEN AVE
HINSDALE, IL 60521**Current Mailing Address:**BOX ONE
OAK BROOK, IL 60522-3001**FEI Number:** 36-6108515**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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**Officer/Director Detail :**

Title	PD
Name	LEVENDUSKY, TIMOTHY
Address	8 CHEVAL DR
City-State-Zip:	OAK BROOK IL 60523

Title	SECRETARY
Name	BARTH, ROBERT
Address	1211 BIRCHWOOD RD
City-State-Zip:	OAK BROOK IL 60523

Title	DIRECTOR
Name	BATES, GIL
Address	259 ECHO VALLEY RD
City-State-Zip:	LAKE CITY TN 37769

Title	DIRECTOR
Name	COPPER, TIM
Address	707 W OGDEN AVE
City-State-Zip:	HINSDALE IL 60521

Title	T
Name	FREDRICKSON, DWIGHT
Address	10 CHEVAL DR.
City-State-Zip:	OAK BROOK IL 60523

Title	CHAIRMAN
Name	PAINE, STEPHEN
Address	8706 WEST ESECO RD
City-State-Zip:	AGRA OK 74824

Title	DIRECTOR
Name	YORK, DAVID
Address	11330 W. WHITAKER AVE.
City-State-Zip:	GREENFIELD WI 53228

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY LEVENDUSKY**PRESIDENT****01/27/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date