2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11098

Entity Name: BIBLE BASICS INTERNATIONAL, INC.

Current Principal Place of Business:

13042 TARPON SPRINGS RD ODESSA, FL 33556

Current Mailing Address:

P.O. BOX 726

ODESSA. FL 33556-0726 US

FEI Number: 23-7328667 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DRAKE, EVAN PRES 13042 TARPON SPGS. ROAD ODESSA, FL 33556 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title TD

DRAKE, EVAN PRES REV ROBINSON, FRANK REV Name Name

Address 13646 VANDERBILT RD Address **POINT BRITTANY 508/5, 5220**

BRITTANY DRS ODESSA FL 33556

City-State-Zip: City-State-Zip: SAINT PETERSBURG FL 33715

Title D Title

BLACK, CHARLES Name Name PRIDDY, GLENN REV. Address 11345 WINDSTAR CT. 433 CHESTNUT WAY Address

City-State-Zip: NEW PORT RICHEY FL 34654 City-State-Zip: NEW CUMBERLAND PA 17070

Title COB Title SD

Name MITTEN, JOHN R Name DORSEY, DAVID

24043 TWISTER LN Address Address 19424 WEYMOUTH DR

City-State-Zip: BROOKSVILLE FL 34602 City-State-Zip: LAND O LAKES FL 34639

Title Title

KIEFER, JAMES K Name PRIDDY, EUGENE A DR. Name Address 4836 SANDPOINTE DR. Address 3526 TEESIDE DR.

NEW PORT RICHEY FL 34655 City-State-Zip: NEW PORT RICHEY FL 34655 City-State-Zip:

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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.

02/06/2013 SIGNATURE: EVAN DRAKE **PRES**

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 06, 2013

Secretary of State

CC6931661665

Officer/Director Detail Continued:

Title D

Name MEISTER, HERMAN C REV
Address 15107 LAUREL COVE CIR

City-State-Zip: ODESSA FL 33556