## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000001470

Entity Name: CITY BIBLE COLLEGE, INC.

Littly Name. Of Fibility College, INC

**Current Principal Place of Business:** 

122 EAST MAIN STREET STE 266

LAKELAND, FL 33801

**Current Mailing Address:** 

CITY BIBLE COLLEGE INC 2958 BELLFLOWER WAY LAKELAND, FL 33811 US

FEI Number: 45-4484374 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCREE, KELVIN R 2958 BELLFLOWER WAY LAKELAND, FL 33811 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

FILED Apr 30, 2019

**Secretary of State** 

4148458586CC

Officer/Director Detail:

Title VP Title VC

NameMCCREE, EVETTE MNameLOYD, GERALD G DR.Address2958 BELLFLOWER WAYAddress247 JOHNSTON AVENUECity-State-Zip:LAKELAND FL 33811City-State-Zip:PITTSBURGH PA 15207

Title DIR Title PRESIDENT

NameLEONARD, PRESTON D DR.NameMCCREE, KELVIN RENARDAddress2720 12TH AVENUE SOUTHAddress2958 BELLFLOWER WAYCity-State-Zip:ST. PETERSBURG FL 33712City-State-Zip:LAKELAND FL 33811

Title STRATEGY AND DEVELOPMENT

Name JUDITH , WILLIAMS ANN DR.

Address 330 CLAIBORNE ROAD

SUITE 302

City-State-Zip: NORTHEAST MARYLAND MD 21901

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: KELVIN MCCREE

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/30/2019