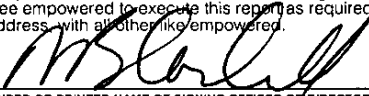
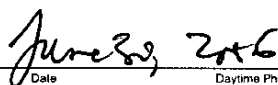


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 17, 2006 8:00 am
Secretary of State

07-17-2006 90143 011 ****61.25

DOCUMENT # N04000002253 1. Entity Name UNION THEOLOGICAL SEMINARY AND PRESBYTERIAN SCHOOL OF CHRISTIAN EDUCATION, INC.					
Principal Place of Business 3401 BROOK RD RICHMOND, VA 23227			Mailing Address 3401 BROOK RD RICHMOND, VA 23227		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 54-0206428	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent DEBOVISE, JOHN TURLEY 3501 SAN JOSE ST TAMPA, FL 33629				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by September 6, 2006			9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State			10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
P WEEKS, LOUIS B 3401 BROOK RD RICHMOND, VA 23227			☐ Change ☐ Addition		
V/T CASHWELL, MICHAEL 3401 BROOK RD RICHMOND, VA 23227			☐ Change ☐ Addition		
T/C ROURK, JANE D 31 STONRIDGE PLACE DURHAM, NC 27705			☒ Delete ☐ Change ☐ Addition		
T/S FAIR, FAIRFAX F 1011 CHEROKEE ROAD LOUISVILLE, KY 40204			☐ Delete ☐ Change ☐ Addition		
☐ Delete			C ROSS, Dr Arthur III 1704 Oberlin Road Raleigh, NC 27608		
☐ Delete			☐ Change ☒ Addition		
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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
 Date  Daytime Phone #					