FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 02 1998 8:00am
Secretary of State

DOCUMENT # **F97000005231 (2)**

1. Corporation Name
COVENANT THEOLOGICAL SEMINARY, A CORPORATION

Principal Place of Business	Mailing Address
12330 CONWAY RD. ST LOUIS MO 63141	12330 CONWAY RD. ST LOUIS MO 63141

3. Date Incorporated or Qualified: 10/06/1997

4. FEI Number: 43-0863116 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MOORE, LANNY W SR
3095 KENNESAW ST.
FT MYERS FL 33916

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ALEXANDER, PAUL REV		1.2 NAME		
STREET ADDRESS	1400 EVANGEL DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	HUNTSVILLE AL 35802		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HAY, WILLIAM G REV		2.2 NAME		
STREET ADDRESS	228 CREST DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL 35209		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	TURNER, WALTER		3.2 NAME		
STREET ADDRESS	159 SPRING GROVE RD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PITTSBURG PA 15235		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HERRING, WAYNE C REV		4.2 NAME		
STREET ADDRESS	9074 DAVIES PLANTATION RD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	MEMPHIS TN 38133		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SPENCER, JOHN E		5.2 NAME		
STREET ADDRESS	3500 MILL RUN RD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL 35223		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	ARMENDING, HUDSON		6.2 NAME		
STREET ADDRESS	16 FAIRWAY DR.		6.3 STREET ADDRESS		
CITY-ST-ZIP	QUARRYVILLE PA 17566		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wayne C Herring **SIGNATURE REQUIRED**