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May 01 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N97000004693 (4)

1. Corporation Name

NEW COVENANT INTERNATIONAL THEOLOGICAL SEMINARY,
INC.

Principal Place of Business

Mailing Address

4117 ALPINA COURT, NORTH
LAKE WORTH FL 33436

4117 ALPINA COURT, NORTH
LAKE WORTH FL 33436



3. Date Incorporated or Qualified

08/15/1987

4. FEI Number

650473019

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

6. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PETERS, TOMMY C
4117 ALPINA COURT, NORTH
LAKE WORTH FL 33436

81 Name DYSON, KEVIN, DR

82 Street Address (P.O. Box Number is Not Acceptable)

66 PAXFORD LANE

83

84 City BOYNTON BEACH

FL

85 Zip Code

33462

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 617.0502, Florida Statutes.

SIGNATURE DR. KEVIN DYSON, PRESIDENT

[Signature]

02 April 1998

Signature, typed or printed name of registered agent and title if applicable

Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME DYSON, KEVIN
STREET ADDRESS 66 PAXFORD LANE
CITY-ST-ZIP BOYNTON BEACH FL 33462

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D
NAME DYSON, PAMELA JOY
STREET ADDRESS 66 PAXFORD LANE
CITY-ST-ZIP BOYNTON BEACH FL 33462

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D
NAME BRIGGS, DAVID WAYNE
STREET ADDRESS 1835 CARANDIS ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33406

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D
NAME PETERS, TOMMY C
STREET ADDRESS 4117 ALPINA COURT, NORTH
CITY-ST-ZIP LAKE WORTH FL 33436

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

[Signature]

3/4/98

CR2E037 (10/97)