

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003480

FILED  
Jan 05, 2005  
Secretary of State

**Entity Name:** TRINITY EVANGELICAL DIVINITY SCHOOL, INC.

**Current Principal Place of Business:**

2065 HALF DAY ROAD  
DEERFIELD, IL 60015

**New Principal Place of Business:**

**Current Mailing Address:**

2065 HALF DAY ROAD  
DEERFIELD, IL 60015

**New Mailing Address:**

**FEI Number:** 36-2801013

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ETIENNE, PETER  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: D ( ) Delete  
Name: DEKLAVON, ROBERT  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: D ( ) Delete  
Name: PETERSON, WILLIAM  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: P ( ) Delete  
Name: WAYBRIGHT, GREGORY L  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: VP ( ) Delete  
Name: PICHA, MICHAEL  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: T ( ) Delete  
Name: ANDERSON, WES  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: THOR, CHUCK  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: D (X) Change ( ) Addition  
Name: SOLIDAY, ED  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: D (X) Change ( ) Addition  
Name: NYBERG, NEIL  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: PICHA, MICHAEL  
Address: 2065 HALF DAYROAD  
City-St-Zip: DEERFIELD, IL 60015

Title: T (X) Change ( ) Addition  
Name: ANDERSON, WESLEY  
Address: 2065 HALF DAY ROAD  
City-St-Zip: DEERFIELD, IL 60015

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL PICHA

VP

01/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date