

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008475

**FILED  
Mar 21, 2014  
Secretary of State  
CC3567401286**

**Entity Name:** PASTOR TRAINING INSTITUTE, INC.

**Current Principal Place of Business:**

1208 US HIGHWAY 1  
SUITE B  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

1208 US HIGHWAY 1  
SUITE B  
NORTH PALM BEACH, FL 33408 US

**FEI Number: 75-3252284**

**Certificate of Status Desired: No**

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

ROGERS, STEVE  
1208 US HIGHWAY 1  
SUITE B  
NORTH PALM BEACH, FL 33408 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

**Officer/Director Detail :**

Title P  
Name ROGERS, STEVE  
Address 1208 US HIGHWAY 1, SUITE B  
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP  
Name ROGERS, CYNTHIA A  
Address 1208 US HIGHWAY 1, SUITE B  
City-State-Zip: NORTH PALM BEACH FL 33408

Title SEC  
Name HETZER, BRIAN  
Address 2148 N. OAKLEY, #1  
City-State-Zip: CHICAGO IL 60647

*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: STEVE ROGERS**

**PRESIDENT**

**03/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date