### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1100008527

Entity Name: OCALA THEOLOGICAL SEMINARY INC.

## **Current Principal Place of Business:**

1105 NW 4TH STREET OCALA, FL 34475

# **Current Mailing Address:**

1105 NW 4TH STREET OCALA, FL 34475

# FEI Number: 45-2845738

## Name and Address of Current Registered Agent:

ROBINSON, ABRAHAM SR 3334 NW 56TH AVE OCALA, FL 34482 US

Date

Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Title	CEO	Title	Ρ
Name	MAEWETHERS, FRED SR	Name	GAMBLE, JEROME
Address	1105 NW 4TH	Address	2350 SE 110TH
City-State-Zip:	OCALA FL 34475	City-State-Zip:	OCALA FL 34480
Title	D	Title	D
Name	MAEWEATHERS, MICHAEL L	Name	RAMBERT, DAISY
Address	10395 SW 49TH AVE	Address	2869 SW 92ND RD
City-State-Zip:	OCALA FL 34476	City-State-Zip:	OCALA FL 34476
Title	D	Title	D
Name	HARDAWAY, WARREN	Name	ROBINSON, ABRAHAM
Address	42 PEACAN TRAIL	Address	3334 NW 56TH AVE
City-State-Zip:	OCALA FL 34472	City-State-Zip:	OCALA FL 34482

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: ABRAHAM ROBINSON

PRESIDENT

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05/01/2013
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Electronic Signature of Signing Officer/Director Detail

Date