

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000000403

Entity Name: KNOX THEOLOGICAL SEMINARY INC.**Current Principal Place of Business:**5554 N.FEDERAL HIGHWAY
FT. LAUDERDALE, FL 33308**Current Mailing Address:**5554 N.FEDERAL HIGHWAY
FT. LAUDERDALE, FL 33308 US**FEI Number:** 46-1812625**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAMERSON, SAMUEL P DR.
5554 N.FEDERAL HIGHWAY
FT. LAUDERDALE, FL 33308 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:** DR. SAMUEL LAMERSON

02/03/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	LAMERSON, SAMUEL P DR.
Address	5554 N.FEDERAL HIGHWAY
City-State-Zip:	FT. LAUDERDALE FL 33308

Title	D
Name	ROSEWELL, TINA C
Address	5554 N.FEDERAL HIGHWAY
City-State-Zip:	FT. LAUDERDALE FL 33308

Title	VP
Name	SANSBURY, TIMOTHY
Address	5554 N.FEDERAL HIGHWAY
City-State-Zip:	FT. LAUDERDALE FL 33308

Title	D
Name	COHRAN, CLARK
Address	5554 N.FEDERAL HIGHWAY
City-State-Zip:	FT. LAUDERDALE FL 33308

Title	D
Name	ASHCRAFT, WILLIAM E
Address	5554 N.FEDERAL HIGHWAY
City-State-Zip:	FT. LAUDERDALE FL 33308

Title	D
Name	MARKS, DONALD M
Address	5554 N.FEDERAL HIGHWAY
City-State-Zip:	FT. LAUDERDALE FL 33308

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: TINA ROSEWELL**CONTROLLER**

02/03/2015

Electronic Signature of Signing Officer/Director Detail

Date