

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 700640

1. Entity Name

PENSACOLA CHRISTIAN COLLEGE, INC.

FILED

May 13, 2002 8:00 am  
Secretary of State

05-13-2002 90243 023 \*\*\*\*61.25

Principal Place of Business

Mailing Address

250 BRENT LANE  
PENSACOLA FL 32503  
US

BOX 18000  
PENSACOLA FL 32523

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0940532

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HORTON, ARLIN R  
250 BRENT LANE  
PENSACOLA FL 32503

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME HORTON, ARLIN R. ☐ Delete  
STREET ADDRESS 250 BRENT LANE  
CITY-ST-ZIP PENSACOLA FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME RAMMEL, JOSEPH ☐ Delete  
STREET ADDRESS 1480 CHALET PL  
CITY-ST-ZIP PENSACOLA FL 32514

TITLE DC ☒ Change ☐ Addition  
NAME RAMMEL, JOSEPH  
STREET ADDRESS 1480 CHALET PL  
CITY-ST-ZIP PENSACOLA, FL 32514

TITLE STD  
NAME HORTON, REBEKAH ☐ Delete  
STREET ADDRESS 250 BRENT LANE  
CITY-ST-ZIP PENSACOLA FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME YOUNG, DAVID ☐ Delete  
STREET ADDRESS 81 LICKING VIEW DRIVE  
CITY-ST-ZIP HEATH OH 43056

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME KILPATRICK, VIRGINIA ☐ Delete  
STREET ADDRESS 4250 WOODBINE ROAD  
CITY-ST-ZIP PACE FL 32571

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arlin R. Horton

4/23/2002

(950) 478-8480

Date

Daytime Phone #

CR2E037 (9/01)