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(Requestor's Name)
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(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
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(Business Entity Name)
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TRANSMITTAL LETTER

10: Qualification/Registration Section		
Division of Corporations		3 SI
SUBJECT: Goston College (Name of Corbo	e Inc.	A P
(Name of Corpo	eration)	<u>κ</u> ξ ω [
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		5 F 5
	•	
Dear Sir or Madam:		**
The enclosed "Application by Foreign Not for Profit its Affairs in Florida", "Certificate of Existence", an referenced not for profit corporation to conducts its	d check are submitted to re	
Please return all correspondence concerning this ma	tter to the following:	
James 2. Histand (Name of Per	son)	
Gushen Callege Firm/Compa	ny)	
1700 S. Main St. (Address)		
Gothen, IN 4652 (City, State and Zi	p Code)	
For further information concerning this matter, please	se call:	
James 1 thistand at (5) (Name of Person)	Area Code & Daytime Telepho	7456
(Name of Ferson)	Area Code & Daytime Telepho	me Number
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St.	MAILING ADDRESS: Qualification/Tax Lien Sec Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	ction
Enclosed is a check for the following amount:		
	• •	87.50 Filing Fee, Certificate of Status & Certified Copy

July 3, 2002

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Elizabeth Hewitt

Per our phone call, this is notification to you of a name and identification number change of our organization as follows:

Old Name and ID#

Mennonite Board of Education, Inc. d/b/a Goshen College #35-0868094 Document number F98000006872

New Name and ID# Goshen College, Inc. d/b/a Goshen College #35-2158366

We operate a branch campus in Sarasota, Florida. Please note that the organization itself did not change. The name and ID change was done in order to separate our institution from the legal structure of our sponsoring church organization, which is going through a merger with another branch of the Mennonite Church. Please let me know if there is any other office in the state that should also receive this communication.

Let me know if you have any questions. My phone number is 574-535-7456 and my email is jimlh@goshen.edu

Sincerely.

James L. Histand

Vice-President for Finance

Goshen College



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 29, 2003

JAMES L HISTAND 1700 S MAI ST GOSHEN, IN 46526

SUBJECT: GOSHEN COLLEGE INC.

Ref. Number: W03000020803

We have received your document for GOSHEN COLLEGE INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Written approval and clearance of the terms "UNIVERSITY" and "COLLEGE" must be obtained from the Department of Education, pursuant to section 1005.03, Florida Statutes. The address is:

Commission of Independent Education 2650 Apalachee Parkway #A Tallahassee, FL 32301 (850) 245-3200

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Letter Number: 903A00042685

Marsha Thomas Document Specialist



COMMISSION FOR INDEPENDENT EDUCATION

ANNUAL LICENSE

THIS IS TO CERTIFY THAT

GOSHEN COLLEGE

3205 Southgate Circle

Sarasota, FL 34239

PROGRAM TITLE - CREDENTIAL (DEGREE TYPE, if applicable) Is hereby licensed to offer the following program(s) of instruction

A+ Certificate-Diploma

Management Information Systems-Bachelors (BS)

MCSE/MCSA-Diploma

Network+-Diploma

Organizational Management-Bachelors (BS)

June 1, 2003

Under the provisions of Chapter 1005, Florida Statutes and Chapter 6E, Florida Administrative Code for the period beginning:

Commission for Independent Education

Location Number

2643

This license is non-transferable, non-assumable, and shall be rendered null and void upon any change in the ownership of the licensee.

Page 1 of 1

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Cashen College T (Name of corporation: must include the word "INCO	DRPORATED" or "CORPORATION" or words or
person or partnership if not so contained in the name corporate suffix by a nonprofit corporation.)	rly indicate that it is a corporation instead of a natural at present. "Company" or "Co." may not be used as a
2. (State or country under the law of which it is incorporated)	3. 75-2156 (FEI number, if applicable)
4. January 4, 2002 (Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. Tuly 2002 (Date corporation first conducted Affairs in Fl See sections 617.1501, 617.1502, and 817.155	SEP -3 PH 4: 10 All Als SEE, FLORIUA 526
7. 1700 S. Main St. Goshen Ty 46 (Current mailing ad	
(Carrent Manning and	econdon education (4-year liberal and or country to be carried out in the state of Florida)
9. Name and street address of Florida regist	ered agent:
Patricia Brown	ame)
3205 South gate Office	Circle address)
Sarasota (City)	, Florida,
10. Registered agent's acceptance: Having been named as registered agent and to corporation at the place designated in this apple registered agent and agree to act in this capaci of all statutes relative to the proper and comple with and accept the obligations of my position of	lication, I hereby accept the appointment as ty. I further agree to comply with the provisions ate performance of my duties, and I am familiar
	<u>4</u>

(Registered agent's signature)

Attached is a certificate of existence duly authenticated, not more than 90 days p delivery of this application to the Department of State, by the Secretary of State official having custody of corporate records in the jurisdiction under the law of w incorporated.	or other	š
12. Names and addresses of officers and/or directors: (Street address only- P. C. NOT acceptable)). Box	
A. DIRECTORS (Street address only- P. O. Box NOT acceptable)		
Chairman: VIIII /VIIII		
Address: 22494 County Ra B: Archbold OH 43502		
Vice Chairman: EVVIN Bontrager	03	
Address: 106 Spring Brooke Dr. ==	SEP *	e O
Goshen, IN 46528	عي ا	722
Director: See attached list	P	
- Address:	f ₹	
0). X	0	
Director:		
Address:		
B. OFFICERS (Street address only- P. O. Box NOT acceptable)		
President: Shirley H. Showatter		
Address: 1401 Elmhurst Court	•	
Goshen, IN 46526		
Vice President: John D. Jordy	•	
Address: 210 S. Main St.		
Gashon INI 46526		
secretary/Treasurer James L. Histand		
Address: 63109 CR19, Goshen, IN 46526		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional	al officer	S
and/or directors.		
13. James 2 Thitank		
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		
Tumes (Typed or printed name and capacity of person signing application)		
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Goshen College Board of Directors - 2002-03

Virgil Miller, Board Chair

Paul Bast '04 (Christine Matsuda)	Work	Home
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Senior Vice President	38 Lynnvalley Cres
Email: primca@sympatico.ca	Primerica Financial Services	Kitchener, ON N2N 3B2
	500 Fairway Road S	Phone: (519) 743-9338
2 2	Kitchener, ON N2C 1X3	
use business address	Phone: (519) 893-3500 ext. 22	
	Fax: (519) 893-4678	. ••••
Tom Bishop '05 (Trinda)	Work	Home Co
• ` ` '	VP Public Finance	5385 Autumn Drive
Email: ttbishop@ix.netcom.com	Kirkpatrick-Pettis	Greenwood, CO 801111
	A Mutual of Omalia Company	Phone: (303) 771-0744
use home address	Phone: (303)764-5737	တို် ယဲ 📻
	Fax: (303) 764-5770	
(Vice Chair)	Work	Home =
Ervin L. Bontrager '05 (Karen)	Executive VP	1106 Spring Brooke Drive
za in zanitalen oo (zanita)	Schult/Marlette Homes	Goshen, IN 46528
Email:	Phone: (574) 825-5881	Phone: (574) 534-6689
Eman: ELBontrager@schulthomes.com	Fax: (574) 825-5880	2 1101201 (2.1) 401 0001
EEDOMARE (@sertamornes.com	Assistant: Carla Mullen 825-6227	
Miriam F. Book '05 (James Lapp)	Work	Home
A CONTRACT OF CONTROL PAPPY	Associate Pastor	443 Penn Oak Ct
Email: miriamfbook@juno.com	Salford Mennonite Church	Harleysville, PA 19438
- mon manufacture of the constant	480 Groff's Mill Rd	Phone: (215) 513-4115
use work address	Harleysville, PA 19438	232000 (232) 232
	Phone: (215) 256-0778	
	Fax: (215) 256-6562	
(Secretary)	Work	Home
John Koshmider '03 (Rence)	Professor of Psychology	9600 Pondera Street NW
, ,	Maione College	Massillon, OH 44646
Email: jkoshmider@malone.edu	Phone: (330) 471-8326	Phone(330) 854-2982
	Fax: (330) 471-8478	
J. Elvin Kraybill '04 (Esther)	Work	Home
	Partner	1404 Hillcrest Road
Email: Ekray@gkh.com	Gibbel, Kraybill & Hess, Attorneys	Lancaster, PA 17603
Dazaj er Bernaon	Phone: (717) 291-1700	Phone: (717) 396-7748
	Fax: (717) 509-0740	•
vorie G. Lowe '04		Home
Email: George2lowe@aoi.com		2907 Stafford Avenue
		Markham IL 60426
		Phone: (708) 331-9426
		Fax: (708) 331-1544

Board Dates 2003

January 31 - February 1, 2003 June 5,6,7, 2003 October 10,11, 2003

2004

January 30,31, 2004 May 21, 22, 2004 October 15, 16, 2004

- STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

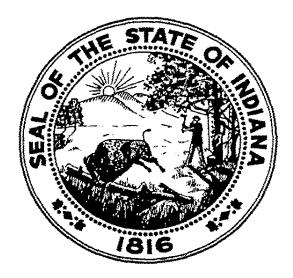
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

GOSHEN COLLEGE, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on January 04, 2002, and was in existence or authorized to transact business in the State of Indiana on June 26, 2003.

I further certify this Non-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-Sixth Day of June, 2003.

TODD ROKITA, Secretary of State