

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003427

**FILED**  
**Apr 27, 2004**  
**Secretary of State****Entity Name:** THE THEOLOGICAL CENTER IN NAPLES, INC.**Current Principal Place of Business:**330 GOODLETTE FRANF RA  
PO BOX 111194  
NAPLES, FL 341080120 US**New Principal Place of Business:**3425 RIVERS ROAD  
NAPLES, FL 34120 US**Current Mailing Address:**5811 PELICAN BAY BLVD.  
SUITE 201  
NAPLES, FL 34109**New Mailing Address:**5811 PELICAN BAY BLVD.  
SUITE 201  
NAPLES, FL 34108**FEI Number:** 62-1820970**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**AUSTIN, ARLENE F  
5811 PELICAN BAY BLVD.  
SUITE 201  
NAPLES, FL 34108 US**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: HARP, TOM  
Address: 1225 PIPER DR  
City-St-Zip: NAPLES, FL 34110

Title: PT ( ) Delete  
Name: HARPER, MICHAEL R  
Address: 350 7TH STREET NORTH  
City-St-Zip: NAPLES, FL 34102

Title: ST ( ) Delete  
Name: TIFFANY, JODY  
Address: 1301 SEVENTH ST SOUTH #204  
City-St-Zip: NAPLES, FL 34102

Title: TT ( ) Delete  
Name: SHAHEEN, JOSEPH  
Address: 2425 RIVERS ROAD  
City-St-Zip: NAPLES, FL 34120

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: HARP, THOMAS REV  
Address: 1225 PIPER DR  
City-St-Zip: NAPLES, FL 34109

Title: PT (X) Change ( ) Addition  
Name: HARPER, MICHAEL R REV  
Address: 350 7TH STREET NORTH  
City-St-Zip: NAPLES, FL 34102

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TT (X) Change ( ) Addition  
Name: SHAHEEN, JOSEPH REV  
Address: 2425 RIVERS ROAD  
City-St-Zip: NAPLES, FL 34120

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOSEPH SHAHEEN

TREA

04/27/2004

Electronic Signature of Signing Officer or Director

Date