

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000445

FILED  
Feb 03, 2011  
Secretary of State

**Entity Name:** F.I.R.E. SCHOOL OF MINISTRY, INC.

**Current Principal Place of Business:**

8410 PIT STOP CT  
SUITE 160  
CONCORD, NC 28027

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5108  
CONCORD, NC 28027

**New Mailing Address:**

**FEI Number:** 59-3691664

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WELLS, JAMES  
4006 EMBERS LANDING  
PENSACOLA, FL 32505 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: PD  
Name: BROWN, MICHAEL L DR.  
Address: 8829 BEAVER CREEK DR  
City-St-Zip: CHARLOTTE, NC 28269

Title: T  
Name: PETERS, WILLIAM E DR.  
Address: 9152 LOWER ROCKY RIVER RD  
City-St-Zip: CONCORD, NC 28025

Title: S  
Name: ALT, STEVE  
Address: 5930 BAREFOOT LN  
City-St-Zip: CONCORD, NC 28027

Title: VP  
Name: GLADSTONE, ROBERT J  
Address: 98 POPLAR WOODS DRIVE  
City-St-Zip: CONCORD, NC 28027

Title: D  
Name: VOLK, SCOTT  
Address: 12120 BARWEN CT  
City-St-Zip: CHARLOTTE, NC 28262

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: WILLIAM E PETERS

T

02/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date