

# 2009 Annual Report

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

09 APR 16 AM 11:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N04000009219

1. Corporation Name

Covenant Theological Seminary of  
Tallahassee FL, Inc.

2. Principal Office Address - No P.O. Box #

2285 Bannerman Rd.

Suite, Apt. #, etc.

3. Mailing Office Address

2285 Bannerman Rd.

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Tallahassee, FL

Zip

32312

Country

USA

Zip

32312

Country

USA

300150716133

04/16/09--01048--014 \*\*\$61.25

CR2E081 (12/08)

4. Date Incorporated or Qualified  
To Do Business in Florida

8-21-06

5. FEI Number

30-0283748

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Willet A. Young, Jr.

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

1321 Millstream Road

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32312

☐ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

3-31-09

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Willet A. Young, Jr.	1321 Millstream Road	Tallahassee, FL 32312
VP	John L. Bayles	13712 Wanegarden Dr.	German town, MD 20874
S, T	Ann H. Young	1321 Millstream Road	Tallahassee, FL 32312

REINSTATEMENT

RH

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Willet A. Young

3-31-09

850-893-5303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #