

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 08, 2005 8:00 am
Secretary of State

02-28-2005 90210 025 ****61.25

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1st MOORE CR2E037 (10/04)

DOCUMENT # N04000009839 1. Entity Name SAINT JOHN THE APOSTLE THEOLOGICAL SEMINARY, INC.					
Principal Place of Business 3601 W. SWANN AVENUE SUITE 209 TAMPA FL 33609			Mailing Address 3601 W. SWANN AVENUE SUITE 209 TAMPA FL 33609		
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 300295926	
				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NIZNIK, URSZULA 6616 28TH STREET S ST. PETERSBURG FL 33712			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D NIZNIK, ROBERT ARCHBISHOP ☐ Delete 6616 28TH STREET S ST. PETERSBURG FL 33712		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BEZLER, GEORGE REV. ☐ Delete 6616 28TH STREET S ST. PETERSBURG FL 33712		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S NIZNIK, URSZULA ☐ Delete 6616 28TH STREET S ST. PETERSBURG FL 33712		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D COLE, ANGELA ☐ Delete 1100 66TH STREET N ST. PETERSBURG FL 33710		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
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: <u>Ursula Niemilä</u> Secretary 02-19-05 (727) 865-6279 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					