

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 30, 2007 8:00 am
Secretary of State

05-30-2007 90004 023 ****61.25

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 - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

30-0295926

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NIZNIK, URSZULA
6616 28TH STREET S
ST. PETERSBURG FL 33712

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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

TITLE: D NAME: NIZNIK, ROBERT ☐ Delete
STREET ADDRESS: 6616 28TH STREET S
CITY, ST, ZIP: ST. PETERSBURG FL 33712

TITLE: D NAME: BEZLER, GEORGE REV. ☐ Delete
STREET ADDRESS: 6616 28TH STREET S
CITY, ST, ZIP: ST. PETERSBURG FL 33712

TITLE: S NAME: NIZNIK, URSZULA ☐ Delete
STREET ADDRESS: 6616 28TH STREET S
CITY, ST, ZIP: ST. PETERSBURG FL 33712

TITLE: D NAME: COLE, ANGELA ☒ Delete
STREET ADDRESS: 1100 66TH STREET N
CITY, ST, ZIP: ST. PETERSBURG FL 33710

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

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STREET ADDRESS:
CITY, ST, ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Urszula Niznik
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-19-07

Date

(813) 966-5673

Daytime Phone #