

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09985

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA CENTER FOR THEOLOGICAL STUDIES, INC.

**Current Principal Place of Business:**

111 NE FIRST ST  
7TH FLOOR  
MIAMI, FL 33132 US

**New Principal Place of Business:**

**Current Mailing Address:**

111 NE FIRST ST  
7TH FLOOR  
MIAMI, FL 33132 US

**New Mailing Address:**

**FEI Number:** 59-2548486      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

O'NEILL, PATRICK H.  
8901 DICKENS  
SURFSIDE, FL 33154 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:** CHP  
**Name:** SIMS, MARK  
**Address:** 1077 NE 98 STREET  
**City-St-Zip:** MIAMI SHORES, FL 33138

**Title:** VCH  
**Name:** MCGOWAN, GREG  
**Address:** 500 E. BROWARD BLVD.# 2100  
**City-St-Zip:** FT LAUDERDALE, FL 33394

**Title:** S-T  
**Name:** BATCHELOR, SANDY  
**Address:** 5900 LAGORCE DRIVE  
**City-St-Zip:** MIAMI BEACH, FL 33140

**Title:** P  
**Name:** O'NEILL, PATRICK  
**Address:** 8901 DICKENS  
**City-St-Zip:** SURFSIDE, FL 33154

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:** PATRICK O'NEILL

PRES

04/16/2010

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

\_\_\_\_\_  
Date