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## Signet Bible College

#### AND THEOLOGICAL SEMINARY ®

RENEWING MINDS AND TRANSFORMING LIVES

#### **Board of Regents**

Dale A. Scadron, M. Div., Th.D., D.D. Chancellor

Michael W. McCoy, M.Div., Th.D. Vice Chancellor

Rev. Anthony Sperl, B.A., B.S. **Board of Regents** 

Dr. Debra Schmidt, Th.D., Ph.D. Board of Regents

Rev. Edwin Cea, BA. Board of Regents

Rev. Anna Scadron, B.A. **Board of Regents** 

Chaplain Brian Maurseth, M.Div. **Dean of students/Faculty** 

Dr. Paul Mikus, M.A., Th.D. Faculty

Tom Barber, M.Th. Faculty

Mark Fitzsimmons, B.Th. Faculty

Date: 01/12/2016

To: Diane Cushing

**Re:** College name change (Formally Chaplains College School of Pastoral Ministry)

Dear, Ms. Cushing,

Per our phone conversation, I have enclosed paperwork (a new *filing*) for a name change from Chaplains College School of Pastoral Ministry, Inc. to Signet Bible College and Theological Seminary, Inc.

This is a new filing thus; I am enclosing a check for \$52.50 to cover the filing fee.

Should you have any questions please feel free to call me at (661) 910-1493

Respectfully

Dr. Dale A. Scadron, Th.D. D.D.

Chancellor



16 JAN 20 PM 3: 03

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	LAINS COLLEGE SCHO	OOL OF PASTORA	L MINISTRY, INC.		<u>_</u>
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and	d fee are submitted for fi	ling.			
Please return all correspondence concern	ing this matter to the foll	owing:			
DR. DALE A. SCADRON					
	(Name of C	Contact Person)			<del></del>
CHAPLAINS COLLEGE					
	(Firm/	Company)	:		
13061 ROSEDALE HWY, OFFICE G-	141			14 S	· >
	(A	ddress)			
BAKERSFIELD, CA 93314					, <del>, , , , , , , , , , , , , , , , , , </del>
	(City/ State	and Zip Code)		(h B	
CHAPLAIN2000@AOL.COM				%	
E-mail addres	s: (to be used for future a	annual report notifica	ation)	7:	<b>J</b>
For further information concerning this n	natter, please call:				
DALE A. SCADRON		661	910-1493		
(Name of Co	ontact Person)	(Area Co	de) (Daytime Teler	hone Number)	)
Enclosed is a check for the following am	ount made payable to the	Florida Departmen	t of State:		
	Filing Fee & \$\sum \$\\$43.75 F ate of Status Certified (Additional enclosed)	Copy C nal copy is C d) (/	52.50 Filing Fee ertificate of Status ertified Copy Additional Copy is inclosed)		
Mailing Address Amendment Section		Street Addre Amendment S			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

CHAPLAINS COLLEGE OF PASTORAL MINISTRY, INC.

6Pd8 0000001N

### (Name of Corporation as currently filed with the Florida Dept. of State)

(Document Numb	er of Corporation (if known)	**
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Prof</i>	t Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
SIGNET BIBLE COLLEGE AND THEOLOGICAL SEMIN	ARY, INC.	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or ti	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	n/a )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		the name of the
Name of New Registered Agent:		
n/a		
New Registered Office Address:	(Florida st	reet address)
n/a		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		ligations of the position.

Signature of New Registered Agent, if changing

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> te <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PT	DR. DALE A. SCADRON	13061 ROSEDALE HWY. G-141
Add			BAKERSFIELD, CA 93314
Remove			<del></del>
2) Change	VTR	DR. MICHAEL W. MCCOY	13061 ROSEDALE HWY. G-141
<u></u> Add			BAKERSFIELD, CA 93314
Remove	DTR	REV. ANTHONY SPERL	13061 ROSEDALE HWY. G-141
3) \ Change		KSV. MOTOR STERE	BAKERSFIELD, CA 93314
Add Remove			
4) Khange	STR	REV. ANNA A. SCADRON	13061 ROSEDALE HWY. G-141
Add			BAKERSFIELD, CA 93314
Remove			
5) Change	TR	REV. BRIAN MAURSETH	13061 ROSEDALE HWY. G-141
X Add			BAKERSFIELD, CA 93314
Remove			
6) Change		BURDICK, STEVE	
, Add			5042 Wilshire Blvd, Office 31351
X Remove			Los Angeles, CA 90036

(attach additional sheets, if necessary).	L. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
N/A		<del></del>			<u></u>	
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• •	N/A	
he date of each amendment(s	) adoption:	, if other than th
ate this document was signed.		
	N/A	
ffective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
	(no more than 50 days after unchannell file date)	
	s block does not meet the applicable statutory filing requirements, this date will not experiment of State's records.	be listed as the
doption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
There are no members or n adopted by the board of dis	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
Dated	2016	
Signature		
(By the c	thairman or vice chairman of the board, president or other officer-if directors to been selected, by an incorporator — if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
DAI	LE A. SCADRON	
	(Typed or printed name of person signing)	
PRE	SIDENT	
<del></del>	(Title of person signing)	C
	(Title of person signing)	5 JAN 22
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