2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16108

FILED Jul 31, 2005 Secretary of State

Entity Name: NORTH AMERICAN SCHOOL OF THEOLOGY, INC.

Current Principal Place of Business: New Principal Place of Business: 214 S MAIN ST AUBURNDALE, FL 33850 US **Current Mailing Address: New Mailing Address:** PO BOX 36 AUBURNDALE, FL 33823 US FEI Number: 59-2875125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WIMBERLY, JAY 509 CLUB HILL RD WINTER HAVEN, FL 33881 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DCP (X) Change () Addition () Delete WIMBERLY, JAY, WIMBERLY, ARTHUR JA, Y Name: Name: 509 CLUB HILL RD. Address: 509 CLUB HILL RD. Address: City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: WINTER HAVEN, FL 33881 Title: VD () Delete Title: () Change () Addition Name: WIMBERLY, SHIRLEY C., Name: Address: 509 CLUB HILL RD. Address: City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: Title: () Delete Title: () Change () Addition MCCABE, DAWN M Name: Name: Address: 2701 AVE. T. NW Address: City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: Title: () Delete Title: () Change () Addition Name: THOMAS, BENTLEY, Name: P.O. BOX 4465 N/A Address: Address: City-St-Zip: ST. THOMAS, USVI, City-St-Zip: Title: () Delete Title: (X) Change () Addition BELL, CHARLES, BELL, CHARLES, Name: Name: 951 15TH ST. NE 461 BAY POINT WAY N Address: Address: WINTER HAVEN, FL City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32259 US Title: () Delete Title: () Change () Addition MCNALLY, THOMAS Name: Name: Address: 1202 BURLINGTON COURT Address: AUBURNDALE, FL 33823 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ARTHUR JAY WIMBERLY DR. 07/31/2005