

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

FILED
Jun 19, 2007 8:00 am
Secretary of State

06-19-2007 90001 010 ****61.25

DOCUMENT # N16108

1. Entity Name

NORTH AMERICAN SCHOOL OF THEOLOGY, INC.



Principal Place of Business

214 S MAIN ST
AUBURNDALE FL 33823
US

Mailing Address

PO BOX 36
AUBURNDALE FL 33823
US



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

59-2875125

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

WIMBERLY, JAY
509 CLUB HILL RD.
~~WINTER HAVEN FL 33881~~

Lake Alfred, FL 33850

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 reinstating)

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 DCP ☐ Delete
NAME WIMBERLY, ARTHUR JAY
STREET ADDRESS 509 CLUB HILL RD.
CITY-STATE-ZIP LAKE ALFRED FL 33850

TITLE VD ☐ Delete
NAME WIMBERLY, SHIRLEY C.
STREET ADDRESS 509 CLUB HILL RD.
CITY-STATE-ZIP LAKE ALFRED FL 33850

TITLE D ☐ Delete
NAME MCCABE, DAWN M
STREET ADDRESS 2701 AVE. T, NW
CITY-STATE-ZIP WINTER HAVEN FL 33881

TITLE D ☒ Delete
NAME THOMAS, BENTLEY
STREET ADDRESS P.O. BOX 4465 N/A
CITY-STATE-ZIP ST. THOMAS, USVI

TITLE D ☒ Delete
NAME BELL, CHARLES
STREET ADDRESS 461 BAY POINT WAY N
CITY-STATE-ZIP JACKSONVILLE FL 32259

TITLE D ☐ Delete
NAME MCNALLY, THOMAS
STREET ADDRESS 1202 BURLINGTON COURT
CITY-STATE-ZIP AUBURNDALE FL 33823

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME George Bone
STREET ADDRESS 18 Tara Lane
CITY-STATE-ZIP Winter Haven, FL 33880

TITLE D ☐ Change ☒ Addition
NAME Gene Kniffin
STREET ADDRESS 722 Old Berkley Rd
CITY-STATE-ZIP Auburndale, FL 33823

TITLE D ☐ Change ☒ Addition
NAME Eugene Manning
STREET ADDRESS 14 The Village Blvd.
CITY-STATE-ZIP Winter Haven, FL 33880

TITLE D ☐ Change ☒ Addition
NAME Andy Shaw
STREET ADDRESS 1620 Beth Lane
CITY-STATE-ZIP Winter Haven, FL 33880-5044

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-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: *Arthur Jay Wimberly* ARTHUR JAY WIMBERLY 06/19/2007 863-956-2215