

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

FILED
Apr 06, 2007 8:00 am
Secretary of State

03-20-2007 90016 017 ****70.00

DOCUMENT # N97000005623 1. Entity Name SOUTH FLORIDA BIBLE COLLEGE & THEOLOGICAL SEMINARY, INC.					
Principal Place of Business 747 S. FEDERAL HIGHWAY DEERFIELD BEACH FL 33441			Mailing Address 747 S. FEDERAL HIGHWAY DEERFIELD BEACH FL 33441		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0807808	
5. Certificate of Status Desired ☒				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GUADAGNINO, JOSEPH 1081 SW 19 STREET BOCA RATON FL 33486				7. Name and Address of New Registered Agent 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 (Required Registered Agents signature required when registering)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY ST ZIP	CFO SLAUGHTER, TINA 2670 NW 123 DR CORAL SPRINGS FL 33065		TITLE NAME STREET ADDRESS CITY ST ZIP	SECRETARY Oonagh Bell Engo 710 SW 14th Street Deerfield Beach, FL 33441	
TITLE NAME STREET ADDRESS CITY ST ZIP	D WELLS, ANDREW 4031 NE 2ND WAY POMPANO BEACH FL 33064		TITLE NAME STREET ADDRESS CITY ST ZIP	DIRECTOR Ken Vaughn 5293 Eagle Lake Dr Palm Beach Gardens, FL 33418-1538	
TITLE NAME STREET ADDRESS CITY ST ZIP	D WILSON, MARVIN 3241 NW 54 DRIVE MARGATE FL 33063		TITLE NAME STREET ADDRESS CITY ST ZIP	DIRECTOR Dolores King - St. George Plantation, FL	
TITLE NAME STREET ADDRESS CITY ST ZIP	P GUADAGNINO, JOSEPH DR 1081 SW 18 ST BOCA RATON FL 33486		TITLE NAME STREET ADDRESS CITY ST ZIP	DIRECTOR Dr. Gary G. Cohen 15423 Grand Haven Drive Clermont, FL 34714	
TITLE NAME STREET ADDRESS CITY ST ZIP	D OTERO, ALBELANDO 1921 NW 190 AVE PEMBROKE FL 33029		TITLE NAME STREET ADDRESS CITY ST ZIP		
TITLE NAME STREET ADDRESS CITY ST ZIP	TD SLAUGHTER, TINA 2670 NW 123 DR CORAL SPRINGS FL 33065		TITLE NAME 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: <i>Joseph Guadagnino</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			3/1/07 954-426-8652 Date Daytime Phone #		