

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000265

FILED  
Mar 12, 2007  
Secretary of State

**Entity Name:** INSTITUTE OF THEOLOGICAL EDUCATION, INC.

**Current Principal Place of Business:**

13045 GRAND BANK LANE  
ORLANDO, FL 32825 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4566  
WINTER PARK, FL 327934566 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MUNOZ, JUAN C  
13045 GRAND BANK LANE  
ORLANDO, FL 32825 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: PD ( ) Delete  
Name: MUNOZ, JUAN C DR  
Address: 13045 GRAND BANK LANE  
City-St-Zip: ORLANDO, FL 32825 US

Title: D ( ) Delete  
Name: COLON, GLADYS C REV  
Address: 13045 GRAND BANK LANE  
City-St-Zip: ORLANDO, FL 32825 US

Title: D ( ) Delete  
Name: NIEVES, MAYRA C REV  
Address: 4531 ARCIE STREET  
City-St-Zip: ORLANDO, FL 32812 US

Title: D (X) Delete  
Name: NIEVES, FELIPE N REV  
Address: 4531 ARCIE STREET  
City-St-Zip: ORLANDO, FL 32812 US

Title: D ( ) Delete  
Name: RIVERA, EFRAIN REV  
Address: 1889 EDEN DRIVE  
City-St-Zip: DELTONA, FL 32725 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: COTTO, FELIX REV  
Address: 133 ALTAVISTA COURT  
City-St-Zip: DAVENPORT, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JUAN COLON MUNOZ

REV

03/12/2007

Electronic Signature of Signing Officer or Director

Date