

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706499

FILED
Mar 28, 2024
Secretary of State
9662023495CC

Entity Name: BAPTIST UNIVERSITY OF FLORIDA, INC.

Current Principal Place of Business:

5400 COLLEGE DRIVE
GRACEVILLE, FL 32440

Current Mailing Address:

5400 COLLEGE DRIVE
GRACEVILLE, FL 32440 US

FEI Number: 59-0799893

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EVANS, NICHOLE W
5400 COLLEGE DR
GRACEVILLE, FL 32440 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: NICHOLE W. EVANS

03/28/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PM
Name CLOER, CLAYTON P DR.
Address 5400 COLLEGE DRIVE
City-State-Zip: GRACEVILLE FL 32440

Title CHAIRMAN
Name CHANDLER, SHELLY DR.
Address 311 N WAUKESHA STREET
City-State-Zip: BONIFAY FL 32425

Title TRUSTEE
Name LOVETT, DIANNE
Address 17741 CR 448
City-State-Zip: MT DORA FL 32757

Title TRUSTEE
Name PEARCE, TYLER
Address 40 WINDY COURT
City-State-Zip: CRAWFORDVILLE FL 32327

Title SECRETARY
Name HEWETT, DAN
Address 2860 APALACHEE TRAIL
City-State-Zip: MARIANNA FL 32446

Title TRUSTEE
Name TRAYLOR, TED DR.
Address 1836 OLIVE ROAD
City-State-Zip: PENSACOLA FL 32514

Title TRUSTEE
Name MCLAUGHLIN, DON
Address 3196 MERCHANTS ROW BLVD, STE 150
City-State-Zip: TALLAHASSEE FL 32311

Title TRUSTEE
Name WILLIAMSON, RICHARD DR
Address 6538 NAVAJO TRAIL
City-State-Zip: LAKELAND FL 33813

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I hereby 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 all other like empowered.

SIGNATURE: CLAYTON P CLOER

PM

03/28/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VC
Name CORAM, CHRIS
Address 12513 STERLING RUN COURT
City-State-Zip: JACKSONVILLE FL 32225

Title TRUSTEE
Name KENNEDY, MICHAEL DR.
Address 5826 100TH AVENUE E
City-State-Zip: PARRISH FL 34219