# above, or on an attachment with all other like empowered.

TT

#### SIGNATURE: VERY REV. JOSEPH SHAHEEN

Electronic Signature of Signing Officer/Director Detail

#### **Current Mailing Address:** 6312 TRAIL BLVD. NAPLES. FL 34108 US

### FEI Number: 62-1820970

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

Electronic Signature of Registered Agent

ARLENE F. AUSTIN, P.A. 6312 TRAIL BLVD. NAPLES, FL 34108 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:

2425 RIVERS RD

**Officer/Director Detail :** Title Ρ Title TT Name SEWELL, SAM Name SHAHEEN, JOSEPH REV Address 10202 VANDERBILT DRIVE Address 2425 RIVERS ROAD City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34120

Certificate of Status Desired: No

FILED Mar 10, 2015 Secretary of State CC5013502575

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

Date

03/10/2015

Date

## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000003427

Entity Name: THE THEOLOGICAL CENTER IN NAPLES, INC.

# **Current Principal Place of Business:**

NAPLES. FL 34120