

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007242

FILED
Apr 07, 2015
Secretary of State
CC4010968724

Entity Name: EVANGELICAL UNIVERSITY AND SEMINARY, INC.

Current Principal Place of Business:

105 EAST BAKER STREET
PLANT CITY, FL 33563

Current Mailing Address:

105 EAST BAKER STREET
PLANT CITY, FL 33563

FEI Number: 33-1170781

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WESTLAKE, ROBERT G
105 EAST BAKER STREET
PLANT CITY, FL 33563 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name WILLIAMS, GARY
Address 13013 BINNION ST
City-State-Zip: DOVER FL 33527

Title D
Name HOUSER, LYNN
Address 2879 HAMMOCK DRIVE
City-State-Zip: PLANT CITY FL 33566

Title D
Name KECK, BENNY
Address 4111 BETHLEHEM RD
City-State-Zip: DOVER FL 33527

Title D, PRESIDENT
Name MORRIS, DANNY L
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name CLINE, CLINT
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name MASHBURN, MARC
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name FREDETTE, MIKE
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name MASON, DON
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Continues on page 2

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: ROBERT G. WESTLAKE

TREASURER

04/07/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MILLER, RANDALL DR.
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name TICHY, OSCAR DR.
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name WEITZEL, JACK
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name WESTLAKE, ROBERT W
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name DOUGHTERY, LINDA
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name TURBEVILLE, STEVE
Address 105 EAST BAKER STREET
City-State-Zip: PLANT CITY FL 33563