

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000006723

**FILED**  
**Feb 19, 2015**  
**Secretary of State**  
**CC4345834246**

**Entity Name:** GENESIS BIBLICAL COLLEGE AND GRADUATE SCHOOL INC.

**Current Principal Place of Business:**

1210 WEST ROBINSON STREET  
ORLANDO, FL 32805

**Current Mailing Address:**

1210 WEST ROBINSON STREET  
ORLANDO, FL 32805

**FEI Number: 27-3368419**

**Certificate of Status Desired: No**

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

WHITTED, ANITA M  
2029 STRYKER STREET  
ORLANDO, FL 32805 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            CEO  
Name            MORGAN, G M  
Address        5420 KAREN COURT  
City-State-Zip: ORLANDO FL 32811

Title            CFO  
Name            SCOTT, ELIJAH DR  
Address        1210 WEST ROBINSON STREET  
City-State-Zip: ORLANDO FL 32805

Title            ADM  
Name            GRAY, SHANTE D  
Address        5420 KAREN COURT  
City-State-Zip: ORLANDO FL 32811

Title            D  
Name            WHITTED, ANITA M  
Address        2029 STRYKER STREET  
City-State-Zip: ORLANDO FL 32805

*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: ANITA M. WHITTED**

**DIRECTOR**

**02/19/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date