

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N12000002444

**Entity Name:** LINCOLN CHRISTIAN UNIVERSITY, INC.

**Current Principal Place of Business:**

100 CAMPUS VIEW DRIVE  
LINCOLN, IL 62656

**Current Mailing Address:**

100 CAMPUS VIEW DRIVE  
LINCOLN, IL 62656 US

**FEI Number:** 37-0711798

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT  
3030 N. ROCKY POINT DRIVE, STE 150A  
TAMPA, FL 33607 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 P  
Name RAY, KEITH H  
Address 100 CAMPUS VIEW DRIVE  
City-State-Zip: LINCOLN IL 62656

Title VP  
Name TEDRICK, LINDSAY  
Address 100 CAMPUS VIEW DRIVE  
City-State-Zip: LINCOLN IL 62656

*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:** LINDSAY TEDRICK

VP OF FINANCE

04/25/2014

Electronic Signature of Signing Officer/Director Detail

Date