

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16235

Entity Name: CONSERVATIVE THEOLOGICAL UNIVERSITY INC.

Current Principal Place of Business:

12021 OLD ST AUGUSTINE RD
JACKSONVILLE, FL 32258

Current Mailing Address:

12021 OLD ST AUGUSTINE RD
JACKSONVILLE, FL 32258 US

FEI Number: 65-0038665

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

YOUNGBLOOD, DR. GENE APRES
12021 OLD ST AUGUSTINE RD.
JACKSONVILLE, FL 32258 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 VPD
Name MURPHY, THOMAS D
Address 9968 S. MORNING STATE RD.
City-State-Zip: BENTONVILLE AR 72712

Title VPD
Name YOUNGBLOOD, GEOFFREY A
Address 3824 RED'S GAIT
City-State-Zip: JACKSONVILLE FL 32223

Title VDST
Name YOUNGBLOOD, DOROTHY DR.
Address 12021 OLD ST AUGUSTINE RD
City-State-Zip: JACKSONVILLE FL 32258

Title PD
Name YOUNGBLOOD, GENE A DR
Address 12021 OLD ST. AUGUSTINE RD.
City-State-Zip: JACKSONVILLE FL 32258

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: DR.GENE A.YOUNGBLOOD

PRES

04/28/2014

Electronic Signature of Signing Officer/Director Detail

Date