

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001284

Entity Name: CORNERSTONE THEOLOGICAL UNIVERSITY, INC.

Current Principal Place of Business:

1015 ATLANTIC BLVD, STE 291
JACKSONVILLE, FL 32233

Current Mailing Address:

1015 ATLANTIC BLVD, STE 291
JACKSONVILLE, FL 32233 US

FEI Number: 59-3174354

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLIVER, ALSTON W
1015 ATLANTIC BLVD., SUITE 291
JACKSONVILLE, FL 32233 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 OLIVER, ALSTON W
Address 106 OAK STREET
City-State-Zip: MILFORD ME 04461

Title ST
Name OLIVER, THERESA
Address 106 OAK STREET
City-State-Zip: MILFORD ME 04461

Title D
Name LYONS, BYRON
Address 1916 HANWELL RD.
City-State-Zip: FREDERICTON, WB CA 03050

Title D
Name SAWLER, RUTH
Address 37 CLARK STREET
City-State-Zip: HARTLAND, NB CA 71300

Title D
Name COTE, LISA M
Address 56 SOUTHGATE ROAD
City-State-Zip: OLD TOWN ME 04468

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: ALSTON W. OLIVER

PRESIDENT

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date