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: JAMES S. SULLIVAN, JR.

Electronic Signature of Signing Officer/Director Detail

Ν City-State-Zip: RINGGOLD GA 30736 City-State-Zip: CH

Officer/Director Detail :				
	Title	PRES	Title	VP
	Name	SULLIVAN, JR., JAMES SDR.	Name	BONE, EDSEL M
	Address	167 CREST VIEW CIRCLE	Address	421 S. 6TH STREET
	City-State-Zip:	RINGGOLD GA 30736	City-State-Zip:	MCCLENNY FL 32063
	Title	DOE	Title	EXE. VICE PRESIDENT
	Name	SULLIVAN, BRET MDIRECTO	Name	TRIMBLE, JAY P. DR.
	Address	105 WILLOWBROOK DR.	Address	4721 ROBINWOOD DR.
	City-State-Zip:	RINGGOLD GA 30736	City-State-Zip:	CHATTANOOGA TN 37416

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.

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

FEI Number: 58-1554537

BONE, EDSEL MDR. 421 S. 6TH STREET MCCLENNY, FL 32812 US

SIGNATURE:

# 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740181

Entity Name: COVINGTON THEOLOGICAL SEMINARY, INC.

### **Current Principal Place of Business:**

1168 CROSS ST FT. OGLETHORPE, GA 30742

### **Current Mailing Address:**

P.O. BOX 176 ROSSVILLE, GA 30741

### Certificate of Status Desired: No

FILED Mar 24, 2016 Secretary of State CC4324756958

Date

03/24/2016 Date

PRESIDENT