## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 703409** 

FILED Feb 02, 2009 Secretary of State

Entity Name: GOOD SHEPHERD LUTHERAN CHURCH OF TAMPA, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

501 S. DALE MABRY TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

501 S. DALE MABRY TAMPA, FL 33609

FEI Number: 59-0910351 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HEISER, STEVEN
2902 N. SHOREVIEW PLACE
TAMPA, FL 33602 US

NAGEL, ROBERT
3822 W. TACON ST.
TAMPA, FL 33629 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: ROBERT NAGEL 02/02/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: T ( ) Delete Title: MR. (X) Change( ) Addition

 Name:
 OXLEY, DEBORAH
 Name:
 DAIGLE, SCOTT

 Address:
 371 CHANNELSIDE WALK WAY # 301
 Address:
 3906 W. SEVILLA ST.

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33629

Title: V ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 MEININGER, STEPHEN
 Name:
 ROBINSON, KENNEATH

 Address:
 1033 NORMANDY TRACE RD
 Address:
 2805 W. HAWTHORNE RD.

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:
 TAMPA, FL 33611

Title: S () Delete Title: S (X) Change () Addition
Name: ROBINSON, CHRIS Name: JOHNSON, ROBIN

 Name:
 ROBINSON, CHRIS
 Name:
 JOHNSON, ROBIN

 Address:
 2805 W. HAWTHORNE RD
 Address:
 3219 W. SAN LUIS ST.

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 TAMPA, FL 33629

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 HEISER, STEVEN
 Name:
 NAGEL, ROBERT

 Address:
 2902 N. SHOREVIEW PL.
 Address:
 3822 W. TACON ST.

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:
 TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT NAGEL P 02/02/2009