

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90050 026 ****61.25

DOCUMENT # 731712 1. Entity Name LATVIAN EV.-LUTHERAN CONGREGATION OF ST. PETERSBURG AND VICINITY, INC.					
Principal Place of Business 2263 ASHBURY DR CLEARWATER, FL 33764 US			Mailing Address 2263 ASHBURY DR CLEARWATER, FL 33764 US		
2. Principal Place of Business 3209 West Maritana Dr. Suite, Apt. #, etc.			3. Mailing Address 3209 West Maritana Dr. Suite, Apt. #, etc.		
City & State St. Pete Beach, FL			City & State St. Pete Beach, FL		
Zip 33706			Zip 33706		
Country U.S.			Country U.S.		
4. FEI Number 59-2161136			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent VILEMSONS, AIVARS 2263 ASHBURY DR CLEARWATER, FL 33764			7. Name and Address of New Registered Agent Name Norbergs, Aija Street Address (P.O. Box Number is Not Acceptable) 3209 West Maritana Dr. City St. Pete Beach FL Zip Code 33706		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Aija Norbergs</i> <i>Aija Norbergs</i> 3/03/04 (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CAKARNIS, IKARS 105 12TH AVE ST PETE BEACH, FL 33706	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KUZMINS, ANNA 2901 FIRST ST NE ST PETERSBURG, FL 33704	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MACKUS, AUSMA 3337 BRIAN RD N PALM HARBOR, FL 34685	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILEMSONS, AIVARS 2263 ASHBURY DR CLEARWATER, FL 33764	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD Norbergs, Aija 3209 West Maritana Dr. St. Pete Beach, FL 33706	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Ritums, Janis 24047 Turtlecreek Ct. Lutz, FL 33549	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Ritums, Andrijs I. 2862 Weatherfield Ct. Clearwater, FL 33761	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Bubelis, Ilona 520 71st Ave, Apt. 2 St. Pete Beach, FL 33706	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Aija Norbergs</i> <i>Aija Norbergs</i> 3/03/04 727-367-6001 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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