

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740569

**FILED**  
**Jun 30, 2004**  
**Secretary of State****Entity Name:** HOLY CROSS LUTHERAN CHURCH OF NORTH MIAMI, FLORIDA**Current Principal Place of Business:**650 NE 135TH ST.  
NORTH MIAMI, FL 33161**New Principal Place of Business:****Current Mailing Address:**650 NE 135TH ST.  
NORTH MIAMI, FL 33161**New Mailing Address:****FEI Number:** 59-0760214**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BARTELS, DENNIS L REV.  
650 NE 135TH ST.  
NORTH MIAMI, FL 33161 US**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** WILLIAM, JANTZ MR.  
**Address:** 18360 NE 30 CT  
**City-St-Zip:** AVENTURA, FL 33160 US**Title:** VPD ( ) Delete  
**Name:** HERNLEM, FRED MR  
**Address:** 3802 NE 207 STREET APT#103  
**City-St-Zip:** AVENTURA, FL 33180 US**Title:** TD ( ) Delete  
**Name:** HUNTINGTON, ANDREW  
**Address:** 253 NE 100 ST  
**City-St-Zip:** MIAMI SHORE, FL 33138 US**Title:** S ( ) Delete  
**Name:** BROWN, ALFREDA MRS.  
**Address:** 1763 NW 58 STREET  
**City-St-Zip:** MIAMI, FL 33142 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDREW HUNTINGTON

TD

06/30/2004

Electronic Signature of Signing Officer or Director

Date