## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 740569**

FILED Apr 20, 2005 Secretary of State

Entity Name: HOLY CROSS LUTHERAN CHURCH OF NORTH MIAMI, FLORIDA

	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
650 NE 135 NORTH MI	STH ST. AMI, FL 33161					
Current Mailing Address:			New Mailing Address:			
650 NE 135 NORTH MI	STH ST. AMI, FL 33161					
FEI Number:	59-0760214	FEI Number Applied For ( )	FEI Number Not Appli	licable ( ) Certificate of Status Desir	red ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
650 NE 135	DENNIS L REV 5TH ST. AMI, FL 33161	v. US				
The above in the State		bmits this statement for the p	urpose of changing it	ts registered office or registered agent	t, or both,	
SIGNATUR	RE:					
	Electronic	Signature of Registered Age	nt	Date		
OFFICERS	AND DIRECT	ORS:	ADDITION	IS/CHANGES TO OFFICERS AND D	IRECTORS:	
Title: Name: Address: City-St-Zip:	PD () C WILLIAM, JANTZ 18360 NE 30 CT AVENTURA, FL 3		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VPD () D HERNLEM, FRED 3802 NE 207 STR AVENTURA, FL 3	REET APT#103	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	TD () D HUNTINGTON, AN 253 NE 100 ST MIAMI SHORE, F		Title: Name: Address: City-St-Zip:	TD (X) Change ( ) Addition MEADOR, DOTTIE 15900 W. PRESTWICK PLACE MIAMI LAKES, FL 33014 US		
Title: Name: Address: City-St-Zip:	S () D BROWN, ALFREI 1763 NW 58 STR MIAMI, FL 33142	EET	Title: Name: Address: City-St-Zip:	()Change ()Addition		

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: ROSLYN NOEL-DORCELY MGR 04/20/2005