## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 740569** 

FILED Jul 07, 2006 Secretary of State

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

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

650 NE 135TH ST.

NORTH MIAMI, FL 33161

**Current Mailing Address: New Mailing Address:** 

650 NE 135TH ST. NORTH MIAMI, FL 33161

FEI Number: 59-0760214 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BARTELS, DENNIS L REV. ROSLYN, NOEL-DORCELY J MRS 650 NE 135TH ST. 650 NE 135TH ST.

NORTH MIAMI, FL 33161 NORTH MIAMI, FL 33161 US 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: ROSLYN NOEL-DORCELY 07/07/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition WILLIAM, JANTZ MR. RUSH, SHARAVEEN MRS. Name: Name:

18360 NE 30 CT Address: 470 N.W. 139 STREET Address: City-St-Zip: AVENTURA, FL 33160 US City-St-Zip: NORTH MIAMI, FL 33168 US

Title: () Delete Title: () Change () Addition

Name: HERNLEM, FRED MR Name: Address: 3802 NE 207 STREET APT#103 Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip:

Title: () Delete Title: () Change () Addition

MEADOR, DOTTIE Name: Name: 15900 W. PRESTWICK PLACE Address: Address: City-St-Zip: MIAMI LAKES, FL 33014 US City-St-Zip:

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

Name: BROWN, ALFREDA MRS. Name: LANTZ, JACI MISS 1763 NW 58 STREET 1919 VAN BUREN #401 Address: Address: City-St-Zip: MIAMI, FL 33142 US City-St-Zip: HOLLYWOOD, FL 33020 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSLYN NOEL-DORCELY MGR 07/07/2006

Electronic Signature of Signing Officer or Director

Date