

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740569

FILED
Jan 27, 2009
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 ()**

Name and Address of Current Registered Agent:

DENNIS, BARTELS L MR.
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: HENNIG, ED MR.
Address: 6301 COLLINS AVENUE APT#1703
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: VPD () Delete
Name: THOMPSON, DANE MR
Address: 971 NE 116 STREET
City-St-Zip: MIAMI, FL 33161 US

Title: TD () Delete
Name: HERMANN, WILLIAM MR
Address: 1310 NE 116 STREET
City-St-Zip: MIAMI, FL 33161 US

Title: S () Delete
Name: MARTINEZ, BOBBY MRS
Address: 11930 NW 22 STREET
City-St-Zip: PEMBROKE PINES, FL 33026 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: NICK, SIBANDA MR
Address: 9581 FOUNTAINEBLEAU BLVD. #608
City-St-Zip: MIAMI, FL 33172 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROSLYN NOEL

MGR

01/27/2009

Electronic Signature of Signing Officer or Director

_____ Date