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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 757799

1. Corporation Name

ST. PAUL EVANGELICAL LUTHERAN CHURCH OF BOCA RATON, FLORIDA, INC.

Principal Place of Business

701 WEST PALMETTO PARK ROAD
BOCA RATON FL 33486

Mailing Address

701 WEST PALMETTO PARK ROAD
BOCA RATON FL 33486



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

04/30/1981

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-1231929

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, AUGUST
701 W. PALMETTO PARK RD
BOCA RATON FL 33486

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME SCHIEFER, CARL
STREET ADDRESS 2036 S. CONFERENCE DR.
CITY-ST-ZIP BOCA RATON FL 33486

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE SD DELETE
NAME SOLLENBERGER, RETA
STREET ADDRESS 10056 COUNTRY BROOK RD.
CITY-ST-ZIP BOCA RATON FL 33428

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VD DELETE
NAME HEFFERNAN, PATRICK
STREET ADDRESS 9574 CAROSEL DR. N.
CITY-ST-ZIP BOCA RATON FL 33434

3.1 TITLE Change Addition
3.2 NAME Leland Felgner
3.3 STREET ADDRESS 3489 Pine Haven Circle
3.4 CITY-ST-ZIP Boca Raton, FL 33431

TITLE TD DELETE
NAME ZOOK, MORGAN J
STREET ADDRESS 243 NW 9TH TERRACE
CITY-ST-ZIP BOCA RATON FL 33486

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE CD DELETE
NAME FUERSTENAU, ROBERT
STREET ADDRESS 800 SW 12TH AVE.
CITY-ST-ZIP BOCA RATON FL 33486

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE AVPD DELETE
NAME DIERKER, JOHN
STREET ADDRESS 6510 WOODBURY RD.
CITY-ST-ZIP BOCA RATON FL 33433

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/22/99 (561) 395-0433

CR2E037 (11/98)