

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90192 042 ****61.25

DOCUMENT # 767713

1. Entity Name

MESSIAH LUTHERAN CHURCH, Inc (MISSOURI SYNOD)

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

14920 Hutchison Road
Suite, Apt. #, etc.

14920 Hutchison Road
Suite, Apt. #, etc.

City & State

City & State

Tampa, FL

Tampa, FL

Zip

Country

Zip

Country

33625

HILLSBOROUGH

33625

HILLSBOROUGH

4. FEI Number

59-2258240

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Guelzow, James R. (Rev)

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

5513 Raven Court

City

Tampa

FL

Zip Code

33625

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	Maurer, Peter
STREET ADDRESS	3148 Lakestone DR
CITY-ST-ZIP	Tampa, FL 33618
TITLE	FSD
NAME	Schermann, Mark
STREET ADDRESS	1032 Sylvia Lane
CITY-ST-ZIP	Tampa, FL 33613
TITLE	T
NAME	Anne Hanto
STREET ADDRESS	13716 Chestersail DR.
CITY-ST-ZIP	Tampa, FL 33624
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: 