FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 FEB -6 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # C10009 (4)

1. Corporation Name

TRINITY EVANGELICAL LUTHERAN CHURCH OF ST. PETER SBURG, FLORIDA

Principal Place of Business	Mailing Address
401 FIFTH STREET NORTH ST. PETERSBURG FL 33701	401 FIFTH STREET NORTH ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/24/1992
3a. Date of Last Report: 04/28/1994
4. FEI Number: 59-0638496 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

LARGE, PATRICIA
401 FIFTH STREET NORTH
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~VD~~	1.1 TITLE	P/D	☒ Change ☐ Addition
NAME	~~DASHER, RICHARD~~	1.2 NAME	~~STRICKEY~~ HAYES, SHIRLEY	
STREET ADDRESS	~~7912 SAILBOAT KEY BLVD. S~~	1.3 STREET ADDRESS	5900 SHORE BLVD S #712	
CITY-ST-ZIP	~~ST PETERSBURG FL 33707~~	1.4 CITY-ST-ZIP	GULFPORT FL 33707	
TITLE	~~PD~~	2.1 TITLE	V/D	☒ Change ☐ Addition
NAME	~~REBANE, MICHAEL~~	2.2 NAME	BONSAL, LUTHER	
STREET ADDRESS	~~410 ROTARY PLACE NE~~	2.3 STREET ADDRESS	12859 OAKHURST RD.N.	
CITY-ST-ZIP	~~ST. PETERSBURG FL~~	2.4 CITY-ST-ZIP	SEMINOLE FL 34646	
TITLE	~~S~~	3.1 TITLE		☒ Change ☐ Addition
NAME	~~LARSEN, RONALD~~	3.2 NAME		
STREET ADDRESS	~~4028 QUEEN ST. N.~~	3.3 STREET ADDRESS		
CITY-ST-ZIP	~~SR. PETERSBURG FL 33714~~	3.4 CITY-ST-ZIP		
TITLE	TD	4.1 TITLE		☐ Change ☐ Addition
NAME	PHIPPS, CHARLES	4.2 NAME		
STREET ADDRESS	1240 15 AVENUE N.	4.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33704	4.4 CITY-ST-ZIP		
TITLE	S	5.1 TITLE		☐ Change ☐ Addition
NAME	MOWRER, HELEN	5.2 NAME		
STREET ADDRESS	4574 34TH AVENUE N	5.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

2/13

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Charles P Phipps CHARLES PHIPPS 1/26/94 (813) 822-3307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0014437