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Feb 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

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 33701-2813

3. Date Incorporated or Qualified: 06/24/1992
3a. Date of Last Report: 01/29/1996

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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: JEANNE SHUTE
82 Street Address (P.O. Box Number is Not Acceptable): 401 FIFTH STREET N.
83:
84 City: ST PETERSBURG FL 85 Zip Code: 33701

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: Jeanne S Shute — DATE: 2/18/97
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	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	LARGE, PATRICIA R		1.2 NAME	GENE WINDHAM	
STREET ADDRESS	2000 BONITA WAY S		1.3 STREET ADDRESS	14447 SANDPIPER CIRCLE	
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CITY-ST-ZIP	CLEARWATER FL 34622	
TITLE	VD	☒ DELETE	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	ELDRIDGE, RUTH		2.2 NAME	NEWTON WILSON	
STREET ADDRESS	6714 AMERICANA DRIVE NE		2.3 STREET ADDRESS	2579 MADRID WAY S	
CITY-ST-ZIP	ST PETERSBURG FL		2.4 CITY-ST-ZIP	ST PETERSBURG FL 33712	
TITLE	TD	☒ DELETE	3.1 TITLE	TD	☐ Change ☒ Addition
NAME	PHIPPS, CHARLES		3.2 NAME	HELEN MOWRER	
STREET ADDRESS	1240 15 AVENUE N.		3.3 STREET ADDRESS	4574 34 AVENUE N	
CITY-ST-ZIP	ST. PETERSBURG FL 33704		3.4 CITY-ST-ZIP	ST PETERSBURG FL 33713	
TITLE	S	☒ DELETE	4.1 TITLE	S	☐ Change ☒ Addition
NAME	MOWRER, HELEN		4.2 NAME	JEANNE SHUTE	
STREET ADDRESS	4574 34TH AVENUE N		4.3 STREET ADDRESS	1061-A 85 TERRACE N	
CITY-ST-ZIP	ST. PETERSBURG FL		4.4 CITY-ST-ZIP	ST PETERSBURG FL 33702	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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.

SIGNATURE: Jeanne Shute REQUIRED — Feb 18 1997
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0049767