## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** Mar 02, 2004 8:00 am **DOCUMENT # 746987 Secretary of State** 1. Entity Name 03-02-2004 90042 021 \*\*\*\*70.00 HOPE LUTHERAN CHURCH Principal Place of Business Mailing Address 1840 N.E. 41ST STREET POMPANO BEACH FL 33064 1840 N.E. 41ST STREET POMPANO BEACH FL 33064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-6044095 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DEER, HARRY J Street Address (P.O. Box Number is Not Acceptable) 1840 NE 41 STREET POMPANO BCH FL 33064 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004: Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change Addition P/D DEER, JACK NAME NAME 3740 NE 13 TERRACE Deer, Harry J. STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33064 1840 NE 41 Street CITY-ST-ZIP CITY-ST-ZIP Pompano Beach FL 33064 PD TITLE Delete TITLE Change Ch ☐ Addition V/D VERMILLION, BIRCH NAME NAME 1840 NE 41 STREET Ward, David STREET ADDRESS STREET ADDRESS POMPANO BCH FL 33064 2758 NE 34 Street CITY-ST-ZIP Lighthouse Point FL 33064 TITLE ☐ Delete TITLE Change Addition MINDLIN, JAY NAME 2865 NE 15 ST STREET ADDRESS STREET ADDRESS POMPANO BCH FL 33064 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information sopplied 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 report or suppliemental 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 of trustee empowered to execute the report as required by Chapter 917, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.