

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2007 08:00 AM
Secretary of State

DOCUMENT # 700266

1. Entity Name

**LUTHER MEMORIAL EVANGELICAL LUTHERAN CHURCH
OF HOLLYWOOD, FLORIDA, INC.**



Principal Place of Business

Mailing Address

1925 N 60TH AVE
1925 N 60TH AVENUE
HOLLYWOOD FL 33021
US

1925 N 60TH AVE
1925 N 60TH AVENUE
HOLLYWOOD FL 33021
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1705322

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARTHUR J. GALLAGHER & CO., ORLANDO
7380 SAND LAKE ROAD
SUITE 390
ORLANDO FL 32819

Name

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

City

FL

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)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME CORGEE, JAMES R
STREET ADDRESS 3100 N OCEAN BLVD APT 2203
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE SD ☐ Delete
NAME GALLAGHER, PAT
STREET ADDRESS 9010 NW 21ST COURT
CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE TD ☐ Delete
NAME SOEDER, BETTY
STREET ADDRESS 7381 CLEVELAND ST
CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE VD ☐ Delete
NAME FELLOWS, DONS
STREET ADDRESS P.O. BOX 813944
CITY-ST-ZIP HOLLYWOOD FL 33081

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty L Soeder (BETTY L SOEDER)

03/07/07

954-989-1766