

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90023 048 ****61.25

DOCUMENT # 700578

1. Entity Name
**GRACE EVANGELICAL LUTHERAN CHURCH
INCORPORATED**



Principal Place of Business
4301 16 ST. NO.
ST PETERSBURG, FL 33703 US

Mailing Address
4301 16 ST. NO.
ST PETERSBURG, FL 33703 US

400100



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

01142008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-0651085

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

FULTHORPE, DOUG
GRACE EVANGELICAL LUTHERAN CHURCH, INC.
4301 16TH STREET N.
ST PETERSBURG, FL 33703

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

Filing Fee is \$61.25
Due by May 1, 2008

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME RAU, CHRISTIAN
STREET ADDRESS 5800 DENVER ST NE
CITY-ST-ZIP SAINT PETERSBURG, FL 33703

TITLE PD ☐ Change ☒ Addition
NAME Engwall, Neal
STREET ADDRESS 8307 Orient Way NE
CITY-ST-ZIP St Petersburg, FL 33702

TITLE TD ☐ Delete
NAME FULTHORPE, DOUGLAS
STREET ADDRESS 627 31ST AVENUE N.
CITY-ST-ZIP SAINT PETERSBURG, FL 33704

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

TITLE VPD ☒ Delete
NAME KARD, CHARLES
STREET ADDRESS 1227 48TH AVE N
CITY-ST-ZIP SAINT PETERSBURG, FL 33703

TITLE VPD ☐ Change ☒ Addition
NAME Hamblin, Jason
STREET ADDRESS 1018 12th Ave N
CITY-ST-ZIP St Petersburg, FL 33705

TITLE SD ☒ Delete
NAME FRANKFORD, LORE
STREET ADDRESS 6519 27TH WAY N
CITY-ST-ZIP SAINT PETERSBURG, FL 33702

TITLE SD ☐ Change ☒ Addition
NAME Lachowicz, Lori
STREET ADDRESS 523 71st Ave N
CITY-ST-ZIP St Petersburg, FL 33702

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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 Chapter 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: Douglas R Fulthorpe Douglas R Fulthorpe, Treas 1-14-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #