

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700810

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** TRINITY EVANGELICAL LUTHERAN CHURCH OF ORLANDO, FLORIDA

**Current Principal Place of Business:**

123 EAST LIVINGSTON ST.  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

427 MAGNOLIA AVE  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 59-0700568

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OGG, SANDY P  
4704 JAMERSON PLACE  
WINTERPARK, FL 32780 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ABER, WREN  
Address: 2016 WOODY DRIVE  
City-St-Zip: WINDERMERE, FL 34786

Title: T ( ) Delete  
Name: ELLIS, VIRGINIA  
Address: 3914 DUMFRIES COURT  
City-St-Zip: APOPKA, FL 32712

Title: AED ( ) Delete  
Name: FABRY, PAUL  
Address: 18210 MC KINNEY ROAD  
City-St-Zip: WIINTER GARDEN, FL 34787

Title: AED ( ) Delete  
Name: BRINK, MARK  
Address: 2286 LAUREL BLOSSOM CIRCLE  
City-St-Zip: OCOEE, FL 34761

Title: DS ( ) Delete  
Name: RAMIZ, ANTHONY  
Address: 1022 RIDGECREST ROAD  
City-St-Zip: ORLANDO, FL 32806

Title: DP ( ) Delete  
Name: WHITE, TOM  
Address: 4442 TIDEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32812

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT TRAPP/TRUSTEE

TS

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date