

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2008 8:00 am
Secretary of State

07-16-2008 90010 043 ****61.25



DOCUMENT # 701097

1. Entity Name
GRACE LUTHERAN CHURCH OF CLEARWATER, INC.
CLEARWATER, FLORIDA

Principal Place of Business	Mailing Address
1812 N.HIGHLAND AVE. CLEARWATER, FL 33755 US	1812 N.HIGHLAND AVE. CLEARWATER, FL 33755 US

DO NOT WRITE IN THIS SPACE



07092008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-0998928	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BURSON, ANNE
2439 INDIAN TRAIL EAST
PALM HARBOR, FL 34683

DO NOT WRITE IN THIS SPACE

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: *Anne Burson* **ANNE BURSON**

July 7, 2008
 DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BURSON, ANNE 2439 INDIAN TRAIL E PALM HARBOR, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, FRANK 250 HIDDEN BROOK DR PALM HARBOR, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MAULTSBY, CAROL 750 ROANOKE DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TIEDMAN, LAWRENCE 1120 KINGSLEY ST CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: *Anne Burson* **ANNE BURSON**

7/9/08
 Date

784-1689
 Daytime Phone #