

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706096

FILED  
Feb 12, 2008  
Secretary of State

**Entity Name:** ST. PAUL LUTHERAN CHURCH OF TAMPA FLORIDA, INC.

**Current Principal Place of Business:**

5103 N CENTRAL AVE  
TAMPA, FL 336032215 US

**New Principal Place of Business:**

**Current Mailing Address:**

5103 N CENTRAL AVE  
TAMPA, FL 336032215 US

**New Mailing Address:**

**FEI Number:** 59-0914077

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENHAM, NATALIE  
5816 N. 17TH STREET  
TAMPA, FL 33610 US

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

FRITZ, CHRISTINA  
210 W GENESEE ST.  
TAMPA, FL 33603 US

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: CHRISTINA FRITZ

02/12/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DVP ( ) Delete  
Name: FRITZ, CHRISTINA  
Address: 210 W. GENESEE ST.  
City-St-Zip: TAMPA, FL 336033631 US

Title: DT ( ) Delete  
Name: ZEMAN, WILL  
Address: 6208 N 9TH STREET  
City-St-Zip: TAMPA, FL 33604 US

Title: PD ( ) Delete  
Name: BENHAM, NATALIE  
Address: 5816 N 17TH ST  
City-St-Zip: TAMPA, FL 33610 US

Title: D ( ) Delete  
Name: COX, LINDA  
Address: 5606 N HABANA AVE  
City-St-Zip: TAMPA, FL 336146064 US

**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:

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: CHRISTINA FRITZ

PRES

02/12/2008

Electronic Signature of Signing Officer or Director

Date