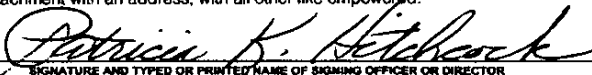


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2007 8:00 am
Secretary of State

07-19-2007 90025 030 ****70.00

DOCUMENT # 706144 1. Entity Name NATIVITY LUTHERAN CHURCH OF PALM BEACH GARDENS, INC.					
Principal Place of Business OF PALM BEACH GARDENS FLORIDA 4075 HOLLY DRIVE PALM BEACH GARDENS, FL 33410			Mailing Address OF PALM BEACH GARDENS FLORIDA 4075 HOLLY DRIVE PALM BEACH GARDENS, FL 33410		
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	4. FEI Number 59-1109086	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HITCHCOCK, F. STEVEN ESQ. 123 WINTER CLUB COURT PALM BEACH GARDENS, FL 33410			Name WEBER, P. THOMAS Street Address (P.O. Box Number is Not Acceptable) 14369 69th DRIVE NORTH City PALM BEACH GARDENS FL Zip Code 33418		
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  DATE 7/16/07 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by September 14, 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HITCHCOCK, F.S. 123 WINTER CLUB COURT PALM BEACH GARDENS, FL 33410	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WEBER, P. THOMAS 14369 69th DR. N. PALM BEACH GARDENS, FL 33418	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SCHALL, HERB 11643 SOUTH RAMBLING DRIVE WELLINGTON, FL 334145074	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HOECKER, ERIC 518 DRIFTWOOD ROAD NORTH PALM BEACH, FL 33408	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KEPLER, MARGARET 4335 CRESTDALE ST PALM BEACH GARDENS, FL 33410	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD POWERS, SCOTT 4086 HOLLY DRIVE PALM BEACH GARDENS, FL 33410	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HITCHCOCK, PATRICIA K 123 WINTER CLUB COURT PALM BEACH GARDENS, FL 33410	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRIFFIS, LINDA 736 MARITIME WAY NORTH PALM BEACH, FL 33410	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 7/16/07 Daytime Phone # 561-622-4998		