


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # 717219 1. Entity Name TRINITY LUTHERAN CHURCH AND SCHOOL OF ROCKLEDGE, FLORIDA, INCORPORATED	
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Principal Place of Business 1330 S FISKE BLVD. ROCKLEDGE, FL 32955	Mailing Address 1330 S FISKE BLVD. ROCKLEDGE, FL 32955
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DO NOT WRITE IN THIS SPACE



03012007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1277551	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHULTZ, LARRY
1820 LAUREL OAK DR. SOUTH.
ROCKLEDGE, FL 32955

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

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	SD SOMMERS, DIXIE 1600 WOODKLAND DR APT. 8102 ROCKLEDGE, FL 32955
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHULTZ, LARRY 1820 LAUREL OAK DR. S. ROCKLEDGE, FL 32955
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOTT, JOHN T 1939 FURMAN CT COCOA, FL 32922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAREHAM, BETH 200 MIZZEN CRT MERRITT ISLAND, FL 32952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FRICK, ROBBIN 1296 TROON WAY ROCKLEDGE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, WYNN 403 N FISKE BLVD COCOA, FL 32922737

U00000730480
05/08/07-80083-006 61.25

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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: Robbin Frick 4/22/07 321-631-0587
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #