

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717576

FILED
Jan 18, 2005
Secretary of State

Entity Name: KING OF GLORY LUTHERAN CHURCH, INC.

Current Principal Place of Business:

4820 FLORAMAR TERRACE
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

4820 FLORAMAR TER
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 59-1665750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, Nanci K
5510 CLIPPER COURT
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

LANIER, MILTON R
9315 WHISPERING MEADOWS CT,
NEW PORT RICHEY, FL 34655 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: MILTON R LANIER

01/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LARSON, Nanci K
Address: 5510 CLIPPER COURT
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD () Delete
Name: BELLAK, SHARON
Address: 1109 TOSKI DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VD () Delete
Name: SMITH, EDWARD
Address: 4925 GLENN DR.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TD () Delete
Name: CUSIMANO, JUNE
Address: 3175 SANDY RIDGE DR.
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LANIER, MILTON R
Address: 9315 WHISPERING MEADOW CT.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: SD (X) Change () Addition
Name: LARSON, Nanci
Address: 5510 CLIPPER CT
City-St-Zip: NEW PORT RICHEY, FL 34652

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

Title: TD (X) Change () Addition
Name: HARGREAVES, DARYL
Address: 4227 TOUCHTON PLACE
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MILTON R LANIER

PD

01/18/2005

Electronic Signature of Signing Officer or Director

Date