## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT#725822** 

Apr 29, 2003 Secretary of State

Entity Name: LUTHERAN MINISTRY IN CHRIST, CORAL SPRINGS, BROWARD COUNTY, FLORIDA, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

NGS BROWARD COUNTY FLORIDA INC. 10021 W. SAMPLE ROAD CORAL SPRINGS, FL 33065

**Current Mailing Address:** 

**New Mailing Address:** 

NGS BROWARD COUNTY FLORIDA INC. 10021 W. SAMPLE ROAD CORAL SPRINGS, FL 33065

NGS BROWARD COUNTY FLORIDA INC. 10021 W. SAMPLE ROAD CORAL SPRINGS, FL 33065 US

FEI Number: 59-1381047 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

REED, REGINA 2400 NW 18 TERRACE CORAL SPRINGS, FL 33065 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete REED, REGINA Name: 2400 NW 118 TERR Address:

City-St-Zip: CORAL SPRINGS, FL 33065

Title: ( ) Delete PAZDRA, DALE Name: Address: 10918 NW 41 DR

City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Delete BETLACH, SANDRA Name:

3502 BROKEN WOODS ISLAND Address:

City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Delete PONTIOUS, JEFF Name: Address: 3469 NW 108 TERR

City-St-Zip: CORAL SPRINGS, FL 33065 (X) Change ( ) Addition

PARKER, JULIE Name: Address: 3058 LILLIAN LANE City-St-Zip: MARGATE, FL 33063

Title: (X) Change ( ) Addition

Name: KLITZ, ROBERT Address: 11540 NW 31 STREET City-St-Zip: CORAL SPRINGS, FL 33065

Title: (X) Change ( ) Addition

PAZDRA, DALE Name: Address: 10918 NW 41 DR

City-St-Zip: CORAL SPRINGS, FL 33065

Title: (X) Change ( ) Addition

Name: BETLACH, DOUG

3502 BROKEN WOODS DRIVE Address: City-St-Zip: CORAL SPRINGS, FL 33065

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: JULIE PARKER Ρ 04/29/2003