## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Mar 08, 2006 8:00 am **Secretary of State DOCUMENT # 728565** 03-08-2006 90181 037 \*\*\*\*70.00 1. Entity Name LIVING WORD LUTHERAN CHURCH (ELCA) OF LANTANA, FLORIDA, INC. Principal Place of Business Mailing Address 60022338 2116 W LANTANA ROAD 2116 W LANTANA ROAD LANTANA, FL 33462 US LANTANA, FL 33462 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02202006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 4. FEI Number 59-1510313 Not Applicable Zip Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent AGER STAMATIN, KERRY Street Address (P.O. Box Number is Not Acceptable) 136 BAREFOOT COVE HYPOLUXO, FL 33462 2761 ROAD FLORAL City zip Code 33462 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. 2006 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS PD TITLE TITLE Addition Delete STAMATIN, KERRY NAME NAME STREET ADDRESS 136 BAREFOOT COVE STREET ADDRESS CITY-ST-ZIP HYPOLUXO, FL 33462 CITY-ST-ZIP VPD PD Delete **M** Change TITLE Addition YAGER, DEBRA YAGER, DEBRA 2741 FLORAL ROAD NAME NAME STREET ADDRESS 2761 FLORAL RD STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33462 CITY-ST-ZIP LAKE WORTH, FL 33462 Change TITLE ☐ Detete ■ Addition NAME FRAGNER, ELLEN FROGNER, ELLEM 1402 W TRAMMELL ST. NAME STREET ADDRESS 1402 W TRAMMELL ST STREET ADDRESS CITY-ST-7IP LANTANA, FL 33462 CITY-ST-ZIP LANTANA, FL 33462 ☐ Change ☐ Addition TITLE ☐ Delete TITLE KENNEY, MATTHEW NAME NAME STREET ADDRESS 6754 COLUMBIA AVENUE STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-7IP TITLE VPD ☐ Change Addition ☐ Delete TITLE Pfohl David Sith Arbor GLEN CIRCLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP LAKE WORTH, FL 33462 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 attachpent with an address, with all other like empowered.

SIGNATURE:

ayes GNING OFFICER OR DIRECTOR

FILED