2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 04, 2004 8:00 am Secretary of State

DOCUMENT # 732568 1. Entity Name ST. PAUL'S EVANGELICAL LUTHERAN CHURCH, INC.						02-04-2004 90048 002 ****61.25				
Principal Place of Business 6150 N. LECANTO HIGHWAY BEVERLY HILLS, FL 34465 US		Mailing Address 6150 N. LECANTO HIGHWAY BEVERLY HILLS, FL 34465 US				54000045				
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02012004	Chg-NP	CR2E0	37 (10/03)		
City & State		City & State			4. FEI Number 59-1552	 671			oplied For	
Zip	Country	Country Zip Co		intry	5. Certificate o	59-100/20/1 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name and Address of Current F	legistered Agent			7. Name and A	ddress of New	Registered	Agent		
IOUNETO	N DETERIO			Name	•					
JOHNSTON, PETER C 6 BEVERLY HILL BLVD BEVERLY HILLS, FL 34465				Street Addre	ess (P.O. Box Number	is Not Accepta	ible)			
				City				Zip Coc	de l	
<u> </u>					FL Zip Code					
	named entity submits this statement for ions of registered agent.	the purpose of changing	ts register	ed office or reg	gistered agent, or both	, in the State of	Florida. 1 am	familiar with,	, and accept	
SIGNATURE .						•.			•	
. ,	Signature, typed or printed name of registered agent a	nd title if applicable. (N	OTE: Registere	d Agent signature re	equired when reinstating)		DATE			
	Signature, typed or pretted name of registered agent a Filling Fee is \$61.25 Due by May 1, 2004	9. Election C		inancing _	\$5.00 May Be Added to Fees	F	tiniainetteettei	k payable t		
10.	Filling Fee is \$61.25	9. Election C	ampaign F	inancing _	\$5.00 May Be	F	Make chec orida Depa	rtment of S	tate	
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12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under eath; 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. 3**5**2-

ENORMANIAM DEN SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

DENNIS NOMMENSEN 2/3/04 Date

249-4481 Daytime Phone #