

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90127 004 ****61.25

DOCUMENT # 732568

1. Entity Name

ST. PAUL'S EVANGELICAL LUTHERAN CHURCH, INC.



Principal Place of Business

6150 N. LECANTO HIGHWAY
BEVERLY HILLS FL 34465
US

Mailing Address

6150 N. LECANTO HIGHWAY
BEVERLY HILLS FL 34465
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1552671

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSTON, PETER C
6 BEVERLY HILL BLVD
BEVERLY HILLS FL 34465

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME NOMMENSEN, DENNIS
STREET ADDRESS 1807 N MUSIAL CT
CITY-ST-ZIP HERNANDO FL 34442

TITLE S ☐ Delete
NAME POOLE, KENNETH
STREET ADDRESS 39 S TYLER ST
CITY-ST-ZIP BEVERLY HILLS FL 34465

TITLE D ☒ Delete
NAME JOHNSTON, ROBERT
STREET ADDRESS 9242 N. COMMODORE DR
CITY-ST-ZIP CITRUS SPRINGS FL 34434

TITLE D ☒ Delete
NAME HAMBEL, MARTIN C
STREET ADDRESS 3670 W. COGWOOD CIRCLE
CITY-ST-ZIP BEVERLY HILLS FL 34465-2986

TITLE T ☐ Delete
NAME LEINBERGER, ALLEN
STREET ADDRESS 2649 W. MESA VERDE DR.
CITY-ST-ZIP BEVERLY HILLS FL 34465

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5850 N. CLAREMONT DR.
CITY-ST-ZIP CITRUS SPRINGS FL 34434

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition
NAME KEITH KITTEL
STREET ADDRESS 13 NEW FLORIDA
CITY-ST-ZIP BEVERLY HILLS, FL. 34465

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: ALLEN LEINBERGER *Allen Leinberger* 3/18/06 352-527-3551