## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#734139**

Apr 27, 2006 Secretary of State

Entity Name: SAINT MATTHEW LUTHERAN CHURCH OF PENSACOLA, FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

7049 PENSACOLA BLVD PENSACOLA, FL 325051223

**Current Mailing Address: New Mailing Address:** 

7049 PENSACOLA BLVD PENSACOLA, FL 325051223

FEI Number: 59-6473746 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:

MARSHALL, ELIZABETH 1340 PORTLAND ST PENSACOLA, FL 32534

**OFFICERS AND DIRECTORS:** 

PENSACOLA, FL 32514

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:

City-St-Zip:

Date

## Electronic Signature of Registered Agent

US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PENSACOLA, FL 32526

() Delete () Change () Addition

MARSHALL, ELIZABETH Name: Name: 1340 PORTLAND ST Address: Address: City-St-Zip: PENSACOLA, FL 32534 City-St-Zip:

Title: DPAS () Delete Title: **DPAS** (X) Change ( ) Addition BROWN, JAMES P. Name: BROWN, JAMES PREV Name: Address: 8595 UNTREINER AVENUE Address: 8595 UNTREINER AVENUE City-St-Zip: PENSACOLA, FL 32534 City-St-Zip: PENSACOLA, FL 32534

Title: () Delete Title: (X) Change ( ) Addition

WESLEY, MARILYN DAVIS, JAMES Name: Name: Address: 2104 WELCOME CIRCLE Address: 251 HERMAN ROAD City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: ATMORE, AL 36502

(X) Change ( ) Addition Title: ( ) Delete Title:

HILL, SANDRA Name: Name: BEASLEY, JOANN Address: 8215 RALEIGH CIR Address: 208 ALTON ROAD City-St-Zip: PENSACOLA, FL 32534 City-St-Zip: PENSACOLA, FL 32506

VΡ Title: () Delete Title: (X) Change ( ) Addition

MARSHALL, ALFORD MARSHALL, ALFORD Name: Name: 1340 PORTAOND ST 1340 PORTLAND ST Address: Address: City-St-Zip: PENSACOLA, FL 32534 City-St-Zip: PENSACOLA, FL 32534

Title: () Delete Title: (X) Change ( ) Addition STEEN, PHONDA LIGHTNER, MYRA Name: Name: Address: 10413 WATERFORD DR Address: 2875 WEST MICHIGAN AVENUE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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

City-St-Zip:

SIGNATURE: MARILYN WESLEY **PRES** 04/27/2006

Electronic Signature of Signing Officer or Director

above, or on an attachment with an address, with all other like empowered.

Date