## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#736873** 

FILED Feb 07, 2008 Secretary of State

Entity Name: ST. LUKE'S UNITED METHODIST CHURCH OF FLORIDA GARDENS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 165 OHIO RD LAKE WORTH, FL 33467 **Current Mailing Address: New Mailing Address:** 165 OHIO RD LAKE WORTH, FL 33467 FEI Number: 59-2297890 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: FOSTER, BRUCE BURKHART, GORDON 834 WHIPPOORWILL TRAIL 1601 TIMBERLANE CIRCLE WEST PALM BEACH, FL 33411 US GREENACRES, FL 33463 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: GORDON BURKHART 02/07/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DEMARIO, DANIEL Name: Name: 5069 EL CLARO N Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition FOSTER, BRUCE Name: TOGNACCI, FRANCES Name: Address: 834 WHIPPOORWILL TRAIL Address: 2722 DUDLEY DRIVE W. #D City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: WEST PALM BEACH, FL 33415 Title: () Delete Title: () Change () Addition INSLEY, JEAN Name: Name: 67 W PINE TREE AVE Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition MCNEILLY, ROBERT Name: Name: STULLER, PAULINE Address: 212 AKRON RD Address: 11149 ALAMEDA BAY CT City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: WELLINGTON, FL 33414 Title: () Delete Title: () Change () Addition BURKHART, GORDON Name: Name: 1601 TIMBERLANE CIR Address: Address: GREENACRES, FL 33463 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WAKE TOM MARCHESE, ANTHONY Name: Name: Address: 3605 CYPRESSWOOD CT Address: 7323 PINE PARK DR. N LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA C. MOSS TREA 02/07/2008