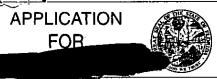
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

737121

1. Corporation Name

ST. STEPHEN LUTHERAN CHURCH, INC.

Principal Place of Business

Mailing Address

2198 NORTH MERIDIAN ROAD TALLAHASSEE FL 32303-5062 2198 NORTH MERIDIAN ROAD TALLAHASSEE FL 32303-5062 FILED

02 OCT 24 AM 9 07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



If ahove a	ddresses are	incorrect in any way, line t	arough incorrect in	nformation a	nd enter o	correction below					
7 7 7					ng Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 10/25/1976			
Suite, Apt. #, etc. Suite, Apt. #,				etc.			5. FEI Number		10,20,1	Applied For	
City & State City & State							59-1688449 Not Applicable				
Zip	Zip Country Zip			Country			6. CERTIFICATE OF STATUS DESIRED 6 for a Certificate of Status				
7. Names a	and Street Ad	dresses of Each Officer an	d/or Director (Flo	rida nonprof	it corpora	tions must list at lea	ast 3 directors)				
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip			
D	BASFORD, NATHAN			735 EAST BARC AVE				TALLAHASSEE FL 32301			
PD	STUART, CHERYL			5424 DE FOORS AD 1239 Conservancy Dr E			or E	TALLAHASSEE FL 32308- 3 2 3 / 2			
0	MILLER, M	9368 CONESTOGA AVE				TALLAHASSEE FL 32308					
V .,	DOWD, D	718 E COLLEGE AVE			TALLAHASSEE FL 32301						
TD	MAURICE,	6548 MONTROSE TRAIL			TALLAHASSEE FL 32309						
Р	RANZINGE	2110 WILDRODIGE ROAD 7972 Preservation R			Rd	TALLAHASSEE FL 32302- 323/2					
8. Name and Address of Current Registered Agent							Name and Address of New Registered Agent				
JACOBSON, MAURICE !						Name Gary G. Ranzinger					
6548 MONTROSE TRAIL					Street Address (P.O. Box N 79 72 Pre			Ranzinger siber is Not Acceptable) servation Rd.			
TALLAHASSEE FL 32309					Suite, Apt. #, Etc.			00008887993 3/02-01056-00\$par##\$Jc.25			
OL 1					Tallahassee			/92-91056-00 state 映記 (25) [FL 3 2 3 /2			
10. I, being	appointed th	e registered agent of the a	pove named corpo	oration, am f	amiliar wit	th and accept the o	bligations of Secti	on 607.0505, F.S. or 61			
Signature o Registered		35,00	TIPE REGISTERED AR			IRED		Date 10/22	2/02		
this rein owed by	statement app the corporat	officer or director or the recollication, the reason for distinction have been paid and the	solution has been names of individ	eliminated, luals listed o	the corpo in this for	rate name satisfies n do not qualify for	the requirements an exemption un	of section 607.0401 or	617.0401, F.S	., that all fees	

SIGNATURE: CARTE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #