## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 737531** 

FILED May 14, 2005 Secretary of State

Entity Name: ST. PAUL'S EVANGELICAL LUTHERAN CHURCH OF ORLANDO, FLORIDA, INC.

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

300 E. CHURCH STREET ORLANDO, FL 32801

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

300 E. CHURCH STREET ORLANDO, FL 32801

FEI Number: 59-0751929 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHANER, BARBARA E 1620 NEWCHAPEL DRIVE ORLANDO, FL 32837

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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

MAYHERCY, JEFF MAYHERCY, JEFF Name: Name: 8639 WILLOW KANE CT. Address: 628 ROSEMERE CIRCLE Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32535

Title: TD () Delete Title: (X) Change ( ) Addition Name: NGUYEN, ANDREA Name: SHANER, BARBARA E Address: 405 BLUE JACKET LANE Address: 1620 NEWCHAPEL DRIVE

City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32837

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

BITTNER, ED BURKETT, OLIVER Name: Name: 651 NORTH WINTER PARK DR. 5837 PLUMTREE COURT Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: ORLANDO, FL 32821

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

Name: LINE, MARK Name: LINE, MARK

12061 RAMBLING OAK BLVD. Address: Address: 548 S.HYER AVENUE City-St-Zip: ORLANDO, FL 32832 City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA E. SHANER TD 05/14/2005