2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737531

FILED Jul 07, 2006 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 US

OFFICERS AND DIRECTORS:

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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: VPD (X) Change () Addition Name: MAYHERCY, JEFF Name: MAYHERCY, JEFF

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

Title: TD () Delete Title: () Change () Addition Name: SHANER, BARBARA E Name:

 Name:
 SHANER, BARBARA E
 Name:

 Address:
 1620 NEWCHAPEL DRIVE
 Address:

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

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

 Name:
 BURKETT, OLIVER
 Name:
 SCHMIDT, DOLORES

 Address:
 5837 PLUMTREE COURT
 Address:
 300 E. CHURCH ST. APT. 1701

 City-St-Zip:
 ORLANDO, FL 32821
 City-St-Zip:
 ORLANDO, FL 32801

orlando, fl. 32821 City-St-Zip: Orlando, fl. 32801

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

Name: LINE, MARK Name: LINE, MARK

 Address:
 548 S.HYER AVENUE
 Address:
 548 S.HYER AVENUE

 City-St-Zip:
 ORLANDO, FL 32801
 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 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: BARBARA E. SHANER TD 07/07/2006