

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737651

FILED
Apr 17, 2009
Secretary of State

Entity Name: CHRIST THE LORD EVANGELICAL LUTHERAN CH. CLEARWATER, FLORIDA,
INCORPORATED

Current Principal Place of Business:

2045 N HERCULES AVE
CLEARWATER, FL 33763 US

New Principal Place of Business:

Current Mailing Address:

2045 N HERCULES AVE
CLEARWATER, FL 33763 US

New Mailing Address:

FEI Number: 59-1716754 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MAHNKE, JEFFREY
2033 HERCULES AVE N.
CLEARWATER, FL 33763 US

Name and Address of New Registered Agent:

JAMES, LEIPSKI O
3475 NORTHBRIDGE DRIVE
CLEARWATER, FL 33761 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: JAMES O. LEIPSKI

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: LEIPSKI, JAMES
Address: 3475 NORTHBRIDGE DRIVE
City-St-Zip: CLEARWATER, FL 33761

Title: TRS (X) Delete
Name: MAHNKE, JEFFREY
Address: 2033 HERCULES AVE
City-St-Zip: CLEARWATER, FL 33763

Title: CP () Delete
Name: KAHRS, ETHAN
Address: 820 VIRGINIA ST. #203
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TRS (X) Change () Addition
Name: LEIPSKI, JAMES
Address: 3475 NORTHBRIDGE DRIVE
City-St-Zip: CLEARWATER, FL 33761

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ETHAN KAHRS

CP

04/17/2009

Electronic Signature of Signing Officer or Director

Date