

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 737843 (3)**

1. Corporation Name

**THE EVANGELICAL LUTHERAN CHURCH OF THE GOOD SHEPHERD**



Principal Place of Business

Mailing Address

10891 102ND AVE NO  
SEMINOLE FL 34648

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SEMINOLE FL 34648

3. Date Incorporated or Qualified  
**01/17/1977**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
**59-1087048**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution



**\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NAGATANI, FRANK  
10045 118TH WAY NO.  
SEMINOLE FL 34642**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PD	BLASK, GAIL	9525 86TH AVE N.	SEMINOLE FL	<input type="checkbox"/>
VD	MAIN, RICHARD	10850 GROVE TERRACE N	SEMINOLE FL	<input type="checkbox"/>
TD	SCHMIDT, ROBERT	9911 118TH WAY N.	SEMINOLE FL	<input type="checkbox"/>
SD	WENTZ, ANDREW	13985 105 TERRACE N	LARGO FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD	Tripp, Terry	11752 Kay Court	Largo, FL. 34648	<input checked="" type="checkbox"/>
TD	Thee, Douglass	13865 - 85th Terrace N.	Seminole, FL. 34646	<input checked="" type="checkbox"/>
SD	Lavine, Linda	8248 - 131st Way N.	Seminole, FL. 34646	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gail Blask Gail Blask April 19, 1996 (813) 391-4644

CR2E037 (12/95)