

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744451

FILED
May 01, 2009
Secretary of State

Entity Name: ST. PAUL LUTHERAN CHURCH OF SARASOTA, FLORIDA, INC.

Current Principal Place of Business:

2256 BAHIA VISTA STREET
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

2256 BAHIA VISTA STREET
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 59-1096054 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

TRUITT, LYLE
2256 BAHIA VISTA STREET
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: CARNAL, JUDY
Address: 4297 MIRIANA WAY
City-St-Zip: SARASOTA, FL 34233

Title: TD () Delete
Name: SHANTZ, PHYLLIS
Address: 4102 FONSICA AVE
City-St-Zip: NORTH PORT, FL 34286

Title: SD () Delete
Name: WITTREN, SHARON
Address: 4520 GLEEB FARM ROAD
City-St-Zip: SARASOTA, FL 34235

Title: VD () Delete
Name: HUTFILZ, GEORGE
Address: 4750 DEL SOL BLVD.
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STRASSER, ROBERT
Address: 3810 OAKLEY GREENE
City-St-Zip: SARASOTA, FL 34235 23

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

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: PHYLLIS SHANTZ

TD

05/01/2009

Electronic Signature of Signing Officer or Director

Date