


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 21, 2007 8:00 am
Secretary of State

05-21-2007 90049 044 ****61.25

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| DOCUMENT # 747980 1. Entity Name ST. MARK EVANGELICAL LUTHERAN CHURCH OF LEESBURG, FLORIDA, INC. |  |
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| Principal Place of Business 28215 S US HWY 27 LEESBURG, FL 34748 US | Mailing Address 28215 S. HWY 27 LEESBURG, FL 34748 US |
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DO NOT WRITE IN THIS SPACE

01112007 No Chg-NP CR2E037 (4/06)

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|---|-------------------------------|
| 4. FEI Number 59-2276551 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent KUSKE, NORMAN C REV 28215 S. HWY 27 LEESBURG, FL 34748 |
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| Filing Fee is \$61.25 Due by May 1, 2007 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DELHYPERE, JACK Gerald R. Zolldan 1433 APACHE 4817 Glen Coc ST. TAVARES, FL 32778 Leesburg, FL 34748 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D CARRUTHERS, BOB 4913 ST ANDREWS ARC LEESBURG, FL 34748 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ALLISON, KENT Jim Andersen 2660Z EVENT 22206 Drumbridge DR. LEESBURG, FL 34748 Leesburg, FL 34748 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HAENLE, RONALD R 33234 PENNBROOKE PKWY LEESBURG, FL 34748 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gerald R. Zolldan 5/1/07 352-323-1788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #