2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753260

FILED Mar 28, 2006 Secretary of State

Entity Name: ST. JOHN'S EVANGELICAL LUTHERAN CHURCH

Current Principal Place of Business: New Principal Place of Business: 241 CYPRESS DRIVE LAKE PARK, FL 33403 **Current Mailing Address: New Mailing Address:** 241 CYPRESS DRIVE LAKE PARK, FL 33403 FEI Number: 59-2371979 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STANAVITCH, LYNN 8514 NASHUÁ DRIVE WEST PALM BEACH, FL 33418 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition VANDERGRIFF, PRISCILLA VANDERGRIFF, PRISCILLA Name: Name: 810 2ND CT Address: 810 2ND CT Address: City-St-Zip: LAKE PARK, FL 33403 City-St-Zip: LAKE PARK, FL 33403 Title: Title: () Delete () Change () Addition ORVILLE, WILLIAMS Name: Name: Address: 837 NORTHERN DR Address: City-St-Zip: LAKE PARK, FL 33403 City-St-Zip: Title: () Delete Title: () Change () Addition PINDER, FRANKLEEN Name: Name: 1081 BEDFORD AVE Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33403 City-St-Zip: Title: Title: () Change () Addition () Delete Name: ROBERTS, KEN Name: 1440 VILLA JUNO DR SOUTH Address: Address: City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip: Title: () Delete Title: () Change () Addition WOODARD, CHRIS Name: Name: 2021 WHITNEY RD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: () Delete Title: (X) Change () Addition SUARES, DONNA VANHORN, LEE Name: Name: Address: 305 PARK AVE Address: 118 E JASMINE DR LAKE PARK, FL 33403 LAKE PARK, FL 33403 City-St-Zip: City-St-Zip:

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: CHRIS WOODARD P 03/28/2006