

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753483

FILED
Feb 14, 2008
Secretary of State

Entity Name: SAINT PAUL LUTHERAN CHURCH, INC.

Current Principal Place of Business:

1407 E. JOHN SIMS PARKWAY
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

1407 JOHN SIMS PARKWAY
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 59-1962181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNDERDAHL, JOHN L
1007 DARLINGTON OAK DRIVE
NICEVILLE, FL 32578 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: P () Delete
Name: HOFFMAN, ROBERT
Address: 1700 GLENWOOD CT
City-St-Zip: NICEVILLE, FL 32578

Title: V () Delete
Name: GAL, RICHARD
Address: 1250 SHIPLEY DR
City-St-Zip: NICEVILLE, FL 32578

Title: T () Delete
Name: BALLARD, MIKE
Address: 325 KILLARNEY
City-St-Zip: NICEVILLE, FL 32578

Title: TR () Delete
Name: NEWMAN, RICHARD
Address: 607 SAMANA WAY
City-St-Zip: NICEVILLE, FL 32578

Title: S (X) Delete
Name: MCAULEY, MICHELLE
Address: 1701 GLENWOOD CT
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOFFMAN, ROBERT O
Address: 1700 GLENWOOD CT
City-St-Zip: NICEVILLE, FL 32578

Title: V (X) Change () Addition
Name: STARK, TIMOTHY M
Address: 106 REDMAN CT
City-St-Zip: NICEVILLE, FL 32578

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

Title: S (X) Change () Addition
Name: PIOVESAN, TERESA
Address: 4212 SHADOW LANE
City-St-Zip: NICEVILLE, FL 32578

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: ROBERT O. HOFFMAN

PRES

02/14/2008

Electronic Signature of Signing Officer or Director

Date