

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758322

FILED
Mar 04, 2007
Secretary of State

Entity Name: FAITH LUTHERAN CHURCH PARRISH, FLORIDA, INC.

Current Principal Place of Business:

9608 U.S. HIGHWAY 301, NORTH
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

9608 U.S. HIGHWAY 301, NORTH
MISSOURI SYNOD, INC.
PARRISH, FL 34219 US

New Mailing Address:

FEI Number: 59-2003222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAITZ, MEL
3034 KIWI PL
ELLENTON, FL 34222 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 (X) Delete
Name: DETAR, DON
Address: 5386 90TH AVE CIR, C
City-St-Zip: PARRISH, FL 34219

Title: VP () Delete
Name: FARDRICK, DICK
Address: 11578 57TH ST CIR, E
City-St-Zip: PARRISH, FL 34219

Title: TR () Delete
Name: PAPADATOS, DANNY
Address: 2906 RIVER WINDS DR
City-St-Zip: PARRISH, FL 34219

Title: RS () Delete
Name: WARNHOFF, KAREN
Address: 130 SUNFLOWER DR.
City-St-Zip: PARRISH, FL 34219

Title: E (X) Delete
Name: NEVILLE, MARILYN
Address: 6022 68TH DR. EAST
City-St-Zip: PALMETTO, FL 34221

Title: EF (X) Delete
Name: WARHOFF, CHUCK
Address: 130 SUN FLOWER DR
City-St-Zip: PARRISH, FL 34219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: FREDRICK, DICK
Address: 11578 57TH ST CIR, E
City-St-Zip: PARRISH, FL 34219

Title: TR (X) Change () Addition
Name: SCHRADER, MADELINE
Address: 9202 69TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

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 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: MADELINE SCHRADER

TR

03/04/2007

Electronic Signature of Signing Officer or Director

Date