

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766048

FILED
May 09, 2005
Secretary of State

Entity Name: GRACE LUTHERAN CHURCH OF TALLAHASSEE, INC.

Current Principal Place of Business:

2919 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2919 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-2226281 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

ECKARD, REVERAND O.R.
2507 BETTON WOODS DR.
TALLAHASSEE, FL 32312 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:

Title: SD () Delete
Name: HARRINGTON, MARIE
Address: 2904 BREY COURT
City-St-Zip: TALLAHASSEE, FL 32309

Title: PD () Delete
Name: HARRINGTON, LISA
Address: 11061 TUNG GROVE RD.
City-St-Zip: TALLAHASSEE, FL 32317

Title: TD () Delete
Name: SCHIELLERD, NANCY
Address: 1208 HALIFAX COURT
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD () Delete
Name: HOLMDEN, BOB
Address: 3116 O'BRIE DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD () Delete
Name: JOGERT, BRIAN
Address: 8246 CHICKSAW TRL
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD () Delete
Name: HOLLAR, THERESA
Address: 6762 WALDEN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 Section 119.07(3)(i), 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: NANCY SCHIELLERD

TD

05/09/2005

Electronic Signature of Signing Officer or Director

Date