

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# C10002

**FILED**  
**May 04, 2004**  
**Secretary of State****Entity Name:** THE FIRST EVANGELICAL LUTHERAN CHURCH OF NEW PORT RICHEY, FLORIDA**Current Principal Place of Business:**6414 DELAWARE AVE.  
NEW PORT RICHEY, FL 34653 US**New Principal Place of Business:****Current Mailing Address:**6414 DELAWARE AVE.  
NEW PORT RICHEY, FL 34653 US**New Mailing Address:****FEI Number:** 59-2611469**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FISCHER, REV. JAMES H  
11722 N. EDISON AVE.  
TAMPA, FL 33612 US**Name and Address of New Registered Agent:**FISCHER, REV. JAMES H  
511 GARRARD DR.  
TEMPLE TERRACE, FL 33617 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: REV. JAMES H. FISCHER

05/04/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FISCHER, REV. JAMES  
Address: 11722 N. EDISON AVE.  
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete  
Name: KALLIO, IRJA  
Address: 6238 ALASKA AVE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TD ( ) Delete  
Name: MANN, EVERETT B  
Address: 5735 PINECREST  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D ( ) Delete  
Name: BALDWIN, MARION  
Address: 5923 FLORIDA AVE  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete  
Name: BOLLER, ANNIKKI  
Address: 3545 MARTELL ST  
City-St-Zip: NEW PORT RICHEY, FL 34653

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FISCHER, REV. JAMES  
Address: 511 GARRARD DR.  
City-St-Zip: TEMPLE TERRACE, FL 33617

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: REV. JAMES H. FISCHER

P

05/04/2004

Electronic Signature of Signing Officer or Director

Date