2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # C10006

1. Entity Name



FILED Mar 30, 2007 8:00 am Secretary of State 03-30-2007 90132 048 ****70.00

	ION EVANGELICAL LUTH N-DELRAY BEACHES, FL				
2929 S. SEA	re of Business CREST BLVD. EACH, FL 33435 US	Mailing Address 2929 S. SEACREST BL BOYNTON BEACH, FL		Timestati iinti iinti estiti esti	!
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02232007 Chg-NP CR2E037 (12/06)	
City & Stat	е	City & State		4. FEI Number Applied Fo 59-6506031 Not Applied	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent	Nama	7. Name and Address of New Registered Agent	
	HARD TLEMAINE AVE NBEACH, FL 33437		Street A	Address (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	
8. The above the obligate SIGNATURE	named entity submits this statement in its constant in the statement of th			or registered agent, or both, in the State of Florida. I am familiar with, and acc	cept
Filing Fee is \$61.25 Due by May 1, 2007					
	•		Impaign Financing Contribution.	\$5.00 May Be Added to Fees Make check payable to Florida Department of State	·
10.	Due by May 1, 2007 OFFICERS AND D	Trust Fund		, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2007	Trust Fund DIRECTORS	Contribution.	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Add	dition
TITLE NAME STREET ADDRESS	OFFICERS AND D OFFICERS AND D PD GREENICH, CAROLE 10988 STAFFORD CIRCLE SO	Trust Fund DIRECTORS	TITLE NAME STREET ADDRESS	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Add S Change Add Add Change Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD GREENICH, CAROLE 10988 STAFFORD CIRCLE SO BOYNTON BEACH, FL 33436 VPD KOUKOULES, GEORGE 1703 SW 22ND STREET	Trust Fund DIRECTORS Delete	Contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Add S Connie Schole Change Add 1832 SW 1715 St. Boynton Beach, FL 33426 Change Add	dition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2007 OFFICERS AND D PD GREENICH, CAROLE 10988 STAFFORD CIRCLE SO BOYNTON BEACH, FL 33436 VPD KOUKOULES, GEORGE 1703 SW 22ND STREET BOYNTON BEACH, FL 33436 S HILL, BOBBI 4061 ALPINIA COURT	Trust Fund Delete UTH	CONTRIBUTION. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Add S Connie Schole Change Add 1832 SW 1715 St. Boynton Beach, FL 33426 Change Add Change Change Add Change Chang	dition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Due by May 1, 2007 OFFICERS AND D PD GREENICH, CAROLE 10988 STAFFORD CIRCLE SO BOYNTON BEACH, FL 33436 VPD KOUKOULES, GEORGE 1703 SW 22ND STREET BOYNTON BEACH, FL 33436 S HILL, BOBBI 4061 ALPINIA COURT BOYNTON BEACH, FL 33436 T KING, RICHARD 6846 CASSTLEMAINE AVE	Trust Fund Delete UTH Delete	CONTRIBUTION. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Add S Connie Schalt Change Add S Boynton Beach FL 33 426 Change Add Change	dition

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 5

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR