

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 8:00 am
Secretary of State

04-07-2006 90023 012 ****70.00

DOCUMENT # N00000002422					
1. Entity Name NEW LIFE LUTHERAN CHURCH, LUTHERAN CHURCH - MISSOURI SYNOD, INC.					
Principal Place of Business P O BOX 823111 PEMBROKE PINES, FL 33082			Mailing Address P O BOX 823111 PEMBROKE PINES, FL 33082		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0999151	
5. Certificate of Status Desired				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BURNHAM, GREGORY S 1181 SW 158 AVE PEMBROKE PINES, FL 33027			Name <u>Scott Neitzel</u> Street Address (P.O. Box Number is Not Acceptable) <u>332 SW 194th Avenue</u> City <u>Pembroke Pines</u> FL <u>33029</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			<u>Scott Neitzel</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NEITZEL, SCOTT F 338 SW 194 AVE PEMBROKE PINES, FL 33029		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President John Karpiuk 4347 SW 153rd Ave Miramar, FL
T WALTER-CLARY, ALICE 2161 SW 176 AVE PEMBROKE PINES, FL 33029		<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
P BURNHAM, GREGORY S 1181 SW 158 AVE PEMBROKE PINES, FL 33027		<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
S BESKIE, RENEE 19326 NW 13 ST PEMBROKE PINES, FL 33029		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
D MCKAY, PAULETTE 3051 SW 194 TERRACE MIRAMAR, FL 33029		<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		T Isis Thomson 18990 NW 10th Terrace Pembroke Pines FL 33029		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		P Scott Neitzel 332 SW 194th St Pembroke Pines FL 33029		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Director Iris Pereyra 3489 SW 153rd Ave Miramar, FL		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing 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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>Scott Neitzel</u> <small>Date</small>		
Date			Daytime Phone #		

ATTACHMENT

40045865

#N00000002422



New Life Lutheran Church, L.C.M.S

P.O. Box 823111

Pembroke Pines, FL 33082

954 430-1989

March 27, 2006

Division of Corporations

P. O. Box 1500

Tallahassee, FL 32302-1500

To Whom it May Concern

:

We recently held elections and have a new roster of directors for our church. Attached is a change form so that the updated Registered Agent and other officers can be updated on our Not-for-profit corporation status.

We are enclosing a check for \$70.00 which covers the annual report filing fee of \$61.25 and the \$8.75 fee for the certificate of status.

Sincerely,

Renee Beskie
Secretary

Cc: Pastor James Tino